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To the Editors of the Medical and Physical Journal.

"We appear astonished when we see the multitude led away by sounds; but if sounds work miracles, it is always upon ignorance: the influence of names is in exact proportion to the want of knowledge."—PALEY.

GENTLEMEN,

ABOUT thirty years ago, there came from France to this Metropolis a *great* Doctor named Le Fevre; and he was of his time, "the grand composer of all human woes." He soared much higher than D'Husson, the inventor only of the Eau Medicinale, not the propagator, the English have done that for him. One hundred guineas were paid down upon the nail to Le Fevre, and then he administered his medicine himself. He, from his high price, only embraced the richest freeholders in England, and his patients were found in the grandest squares in London. He was not heard of in Piccadilly, as Piccadilly then was, nor scarcely was there a patient rich enough for him in Soho Square. Monsieur Le Fevre did his business well. There was no loitering nor lingering in his plan. He was here only for a season. There happened to be in the history of credulity a rich commoner of the name of Brachenbury, of the family of Brachenbury, Governor of the Tower in Richard the Third's time, a gentleman of Cambridgeshire, who took Le Fevre's medicine, and who died under the process of it as administered by the Doctor in person; and his son Charles succeeded to his estates at an early part of his life, before he had left his rotine degrees at the University of Cambridge. This incident, so very flattering to the tempting prosperity of youth, became an animated subject for their conversation; and at their clubs and their associations, they never failed to drink the health of *Doctor Le Fevre*, trusting in their turns to the fortunate credulity of their own gouty fathers. But no sooner was Doctor Le Fevre smoaked, than he decamped, promising to return the next season.

season. That season has never returned, consequently we have heard no more of the Doctor Le Fevre.

He has been said to have realised 50,000*l.* by his prosperous play on English credulity. I have said English credulity, not British, because I really think the northern Learned could not have been so easily amused. But if the medicine and the terms of D'Husson be more pettifogging than that of Le Fevre, yet all about D'Husson is more dangerous to society. D'Husson's medicine is effective, and its circulation is much more general. It is bought by all those who love quackery, and can and do feel a pride in setting up for themselves. If they should happen to be too mean in their nature, and which is often the case, to swallow the proportions D'Husson has directed, rather than not be said to take his medicine upon their own account, they will take that in drop by drop which he has prescribed by spoonfuls. Hence it is that we do not hear of all the mischief, or all the good, as a Cambridge youth would have called it thirty years ago, which it is capable of doing.

Mr. Hughes, the late treasurer of Covent-garden Theatre, swallowed the doses of the Eau Medicinale D'Husson, by the instructions of the vender. He made but two bites of this deleterious cherry. It brought upon him the combined actions of an emetic, a cathartic, a cold sweat and syncopé. Incessant vomitings, purgings, and cold sweats, with privation of all strength, soon too fatally convinced Mr. Hughes of the power possessed by this grand composer. D'Husson has not confined the power of this grand composer to the cure of the gout. Read his bill, and you will find that the praise he embraces of it is much more liberal, it includes all the certain virtues of all the quack medicines, in all the shops of patent quackery in the first streets of this metropolis. Read D'Husson's bill of the attributes of the Eau Medicinale D'Husson.

Who was this Husson? An half-pay officer, it is said. Half-pay officers in France are not to be compared with those in England. Few English officers depend only upon half-pay, and fewer from spirit submit to the shifts for subsistence upon quackery. This hungry medicine has lingered as an invention for years; and, as a prophet is no prophet in his own country, it would have undoubtedly turned out an abortion, if some generous Englishman had not taken compassion from sympathy on its ricketty imbecillity.

What is the composition of the Eau Medicinale D'Husson?

And if the composition cannot be otherwise declared,

What is the comparative action of this Eau Medicinale D'Husson?

This is the point I mean to investigate.——

A colonel

A colonel in the army, lately from Portugal, put one of those curious looking bottles into my hands. I tasted the content, and I recollected something like it. Finding that I recollected a similar taste, I bought one of them. I walked about all the morning tasting it; my confirmation grew more and more strengthened, that the efficient material of the Eau Medicinale was Tobacco. Its taste and action in every respect have confirmed it.

After having tasted it on through the whole of the morning, I smoaked a pipe of tobacco, and I found the effect still more confirmed. I then sweetened some white wine, and added to it a little of the infusion of tobacco, with a small quantity of infusion of Columbo root. I gave a boy a taste of both; he affirmed that the taste of both was alike. I gave a girl also a taste of both, and she affirmed it also. The boy and girl were not known to each other. I judged this to be the best method of ascertaining the fact, by thus trying it upon an unadulterated taste. It is well known that water-drinkers are the best judges of the different flavour of wine.

I think D'Husson, by the turbidity of this coarse mixture, gives into it nothing of tobacco but the infusion. An half-pay officer who turns quack has seldom so much of talent as he has of misery; and if we say, that necessity is the mother of invention, yet this invention belongs not to genius, but is confined to the wants of necessity. The simple talent of a quack would not lead him to prepare an extract, or an oil. Those who do not, ought to know, that the oil and extract of tobacco are amongst the strongest and most deleterious poisons of the vegetable kingdom. The Abbé Fontana, the most intelligent philosopher of this age, has said it and proved it by his own experiments.

I shall for the present proceed no farther in my investigation. But I cannot close the subject without advising the curious sceptic who doubts the facts I have advanced, not to depend upon the mixture I gave, if it be put into any bottle. No. It must be put into one of D'Husson's vender's bottles, and it must be wrapped all over with the magical mummery of paper and printing, and sealed like his, and then, and then only let the comparison of taste and effect be made.

On the first importation of tobacco into England, it was then recommended by the interested for its various powers of curing diseases and restoring health. The properties and the name of the herb were then avowed; whereas at this day its familiarity would not admit of the secret being imparted; because, by the name and property of the herb being known, the charm of the novelty would have been dissolved, the vul-

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gar antidote would have its salutary qualities disowned, and the vender exposed.

But till now the Tobacco-herb has been confined to the pipe, the mouth, and the snuff-box, except occasionally and cautiously it has been given in clysters, when its effect is very powerful indeed, and brings on cold sweats, syncopé, and sometimes, with all our caution, even death. It has not been permitted in any quantity to pass into the stomach knowingly for any good.

The quackery of tobacco has never been from time to time unnoticed. Every age has had its attention called to it. Even the poets of the brightest fame have been celebrated under the fumes of this deleterious and loathsome weed.* And as far back as in the reign of James the First, a Satyrical Poem was written upon it, dedicated to Sir George Villers, by Joshua Sylvester, and from which the following are extracts.

The Poem is entitled,

TOBACCO BATTERED, or at least wise
Ouer-loue so loathsome Vanitie.
by
A Volley of holy Shot
Thundered
From Mount Helicon.

It must not be forgotten, that the application of Tobacco in this Poem to the human constitution, is confined to chewing, smoaking, and snuffing.

FIRST.

The Quackery on the Vertues of Tobacco.

" 'Twere therefore better somewhat else to seek
Than rest in this, so worthie of *dislike;*
Sith curing thus one small infirmity,
It doth create a greater malady,
When thereby freed (perhaps) from *Gout* we fall
In bondage of this *custome* capitall.
For they that *physicks* to a *custome* bring,
Bring their *disease* too, to accustoming.
Perpetuall *physicke* must of force imply
Perpetuall *sicknesse*; or deep foolerie
Compos'd of *anticke* and of phrantick too:
For where's no *sickness*, what should med'cine doo?"

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* See Oxford Sausage, by Browne.

SECOND.

Second.

On the loathsom Offence in Society, of those who accustom themselves to Tobacco.

"Offend their friends with a most *un-respect*,
Offend their wives, and children with neglect;
Offend the eyes, with foule and loathsom sprawlings;
Offend the nose with filthy fumes exhalings;
Offend the ears with loud lewd *execrations*;
Offend the mouth with ougly excreations;
Offend the *sense*, with stupefying sense;
Offend the weake, to follow their offense:
Offend the body, and offend the minde;
Offend the *conscience* in a fearfull kinde:
Of all EXCUSE (saue fashion, custome, will),
In so apparent, proued, granted, *ill*,
Woe, woe to them by whom *offences* come,
So scandalous to all our *Christendome*.

Third.

On the Characters of those who practised and promoted the Use of it.

"Oft have I seen fooles of all sorts frequent it,
Fooles of all size, fooles of all sexes hent it;
Fooles of all colours, fooles of all complexions,
Fooles of all fashions, fooles of all affections,
Fooles natural, fooles artificial,
Fooles RICH and poor, young fooles, old fooles and all,
Whome foole I pitied, for their wilfull folly;
Supposing some discreetly wise (for holy)
Could be entangled with so fond a thing."

And thus you have had the real and best opinion I have to offer upon l'Eau Medicinale D'Husson.

I am, with all respect,
The great, great, great grandson of
JOSHUA SYLVESTER.

To the Editors of the Medical and Physical Journal.

Gentlemen,

On perusing Dr. Hall's interesting case of a tumour on the tongue, in your Journal; it occurred to me that a similar case fell under my care, when I was an assistant, which terminated in ulceration, and was successfully cured by the exhibition of nitrous

nitrous acid. As near as I can recollect, the following are the particulars: Miss C— made application to me in the year 1808, to examine her tongue, which was ulcerated to a considerable extent, and very deep: her mind was much impressed, as she conceived it to be a cancerous affection. On examination, I found the edges hardened, elevated, and irregular, and the discharge was of a fœtid nature; not the least indisposition presented itself, until the mind became influenced with the idea of cancer; and as this appearance is a characteristic of that malady, I certainly was suspicious of its partakin g of that nature. As the part had ulcerated to a great extent, an operation was out of the question, especially upon such a delicate organ; I prescribed an infusion of Fol. Conii Maculati, with Sulph. Allum et Myrrh, for a gargle, to be frequently used; and directed small doses of the Submurias Hydrarg. twice a day, with an opiate at night. These were persevered in for a considerable time without any good effect, and the ulcer rapidly augmented in size. Several sorts of gargles were afterwards applied, and likewise medicines internally, without any beneficial result. At this time, Dr. Beales, of Bury St. Edmund's, had occasion to visit a patient in the neighbourhood where Miss C——— resided, and upon my detailing the particulars of the case, politely expressed a desire to see her. When he had examined the tongue, in the most minute manner, he was of opinion that it bore the characteristic of a cancerous ulcer, and was rather doubtful of success; but as he had given the Nitrous Acid in similar cases, and the effects produced were generally favourable, he particularly wished it to be tried in this; and prescribed as follows, Acid. Nitric. Dil. ℥j. Mellis, ℥ij. Aq. Font. ℔ ij: m. capiat cochlear. iij, sæpe in die; (it was directed to be sucked through a tube, to prevent the acid from corroding the teeth) an opiate was likewise given at night, and a lotion, composed of Ext. Conii. Spr. Vin. Rect. et Aquæ, was ordered to be applied to the tongue frequently. In fourteen days after the exhibition of the acid, healthy granulations were perceived to shoot out at the bottom of the ulcer, which gradually healed from this time, and in the course of three months, (although half the tongue had been in a state of ulceration) it was perfectly well. In about ten days after the tongue was healed, a vesicle appeared upon another part, and ulcerated, but it was soon counteracted by the effects of the acid, which it was now deemed advisable to administer for some time after the cure was complete. I had but little confidence in the external remedies, as similar applications were used before. Several cases of a similar appearance have occurred in my practice of late, and I always

always found the Nitrous Acid, exhibited in the above form, of considerable utility.

I apprehend that this medicine has not been mentioned by any author as being serviceable in such affections; but as I have witnessed the beneficial result arising from its exhibition in numerous cases; I take particular pleasure in promulgating it through the medium of your widely circulating publication, with the motive of inducing practitioners to give it a trial in appropriate cases, and acquaint us with the result of their experiments.

I am, &c.

E. L. KNOWLES, Chir.

Newmarket, Sept. 24th, 1810.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

I WAS led by your criticism on Dr. Rees's observations on disorders of the stomach, to peruse his treatise. Dr. Rees has made use, at the latter end of his remarks, of a well-known work by Dr. Bree on disordered respiration, but I was rather surprised at his report of the opinions of that writer. Dr. Rees gives a quotation from this work, "*Not merely from his admiration of its merit, but because the author has no intention of attributing to the stomach that share in the production of the disease which he is persuaded it possesses.*" To this quotation now referred to, he adds many more from different parts of the work; as testimony *unintended* of the truth of the theory, that a dyspeptic state of the stomach causes asthma. It appears, however, on perusing the "Practical Inquiry," that Dr. Bree has no doubtful opinion on the subject, and the reader will there see fully proved what Dr. Rees shews in part, by quotations, "That Dyspepsia is a certain *predisposing* cause in all cases, and so frequently an *immediate* cause as to form one species of asthma."—Pract. Inq. p. 148.

A quotation that appears at pag. 189, of Dr. Rees's work, might have been given with more precision, as follows, viz. "Whenever dyspepsia prevails, there shall we find a fruitful opportunity of exciting the paroxysm of asthma. If it exist, unaccompanied by other causes, it may be said to occasion the *third species*; but this debility of the stomach must probably concur with other causes before the disease appears in the form of the first species."—Pract. Inq. 4th Edit. p. 145.

Treating of this complaint as a predisposing cause of asthma,

asthma, Dr. Bree says—"*Sir J. Floyer considers this state of the stomach as secondary to the state of the lungs, and not as an immediate cause; but the contrary order is more probable, since asthma seldom appears without having been preceded by dyspepsia, though the latter frequently occurs unconnected with asthma. The power of digestion will certainly be additionally weakened whenever asthma is formed, and in this view dyspepsia may follow asthma; but it has previously been a cause of the disease, which reciprocally augments, and is itself aggravated by, this debility.*"

This must be the opinion of every observing Physician, if he carefully attend to causes of asthma, and reflect on his experience. But hitherto it remains a fact, not creditable to our science, that the authority of Floyer making dyspepsia in all cases a symptom of disordered lungs, is maintained in the practice, however ineffective, of most practitioners.

Under the head of third species of asthma, Dr. Bree says, "Acrimony in the stomach, and duodenum excites the associated effort of all the respiratory muscles which act by sympathy, as if the cause of offence peculiarly disturbed the lungs."—Pag. 208.

He gives instances in which disorder of the stomach was only indicated.—Pag. 209. And at the conclusion of the section his deduction is given from the whole. "It has appeared in the preceding sections, that convulsive asthma is caused by the irritation of some material in the lungs."

"We may conclude from the analogies, the reasoning, and the facts before us, that it may also be caused by irritation in some of the abdominal viscera, but particularly in the *stomach*."

It appears manifestly, therefore, that Dr. Bree "*intended*" to make the affection of the stomach a cause of asthma in all cases of that disease; that in a great majority of cases, which make the first species, dyspepsia is treated of, and considered as a predisposing cause; and that in numerous cases, classed under the third species, he considers it an immediate or proximate cause of asthma.

MEDICUS.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

FROM some observations in the historical sketch of the progress of medicine in the year 1809, by Mr. Royston, I am happy to find the attention of the faculty called to appreciate the

the effects of baths. So much has been written for some years past on the subject of applying modified temperature to the body, as a curative means in disease; that it is an object of the greatest importance, that the faculty in every town in the kingdom, should have it in their power to avail themselves of such aid. The object I have in view, is to establish Dispensaries of heat, where the faculty of the place may order a dose of heat to be administered, with the same facility and exactness, as they now do, with every other article in the shop of the apothecary. I have lately superintended the fitting up of a Dispensary of this kind, which possesses seven different modes of applying heat, in a small room of twelve feet by eighteen: namely, a cold bath, a warm bath, a vapour bath, a cold shower bath, a warm shower bath, a cold douche (or forcible stream of water directed to a particular part) and a warm douche. As the execution of a plan of this nature requires the united assistance of a variety of artists; perfection cannot be expected, without having sustained a variety of failures. At a future period, I purpose to give a description of the manner of constructing these Dispensaries; at present my establishment is open to the inspection of the faculty, and I shall have much pleasure in giving assistance to form similar establishments. For the success of such an institution as I propose, it would require the joint support of the whole faculty of the place in which it may be situated.

To obtain this apparently impossible object, I know of no means so likely to effect the purpose, as to make it the interest of the whole to give it their support; probably some scheme like the following would succeed. Suppose it would require a thousand pounds to fit up a Dispensary of this class, divide the capital into a hundred shares, which should be taken by the *whole* of the faculty of the place, in such proportions as they may agree upon; every individual only to have one vote, however numerous might be his shares. The business of the establishment should be conducted by a committee of three members, to be chosen annually, to whom the superintendant should be answerable for his conduct. Much will depend on the intelligence of this servant; for, as the practice of vapour bathing advances, many substances will be found to exert a powerful influence on the system, when introduced by the medium of the lungs; for instance, in cases of spasmodic asthma, I have found much benefit by making the vapour pass through a sponge, on which a dose of compound spirit of æther, and tincture of opium, was placed. In an appendix to my Essay on Baths, I have given cases in which the good effects of an anodyne vapour, is sufficiently apparent in catarrh, and bronchitis. I shall for the

 present

present forbear alluding to the extensive range of usefulness in medicine, which we may be led to by this fact. Should these hints induce the co-operation of any set of medical men, in the investigation of a subject so important to the best interests, both of society and of the faculty, they may be assured of my aid and assistance.

I am, Gentlemen, yours, &c.

E. KENTISH, M. D.*

Bristol, Sept. 20th, 1810.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IF you think the following Case, first of suppression, and afterwards of incontinence of urine, after parturition, deserving of publication, I will thank you to cause it to be inserted in the Medical and Physical Journal.

I remain, &c.

SAM. MERRIMAN.

Curzon-street, May Fair,
Oct. 11, 1810.

MARY CHAPMAN, 21 years of age, a patient of the Westminster General Dispensary, residing in the neighbourhood of Berwick-street, Soho, was taken in labour of her first child on the 13th October, 1809. Her waters *broke* on the preceding day, but the pains of labor did not come on till about 12 o'clock at noon of the 13th. From this time they continued frequent, and violent for twelve hours, when the strength of the poor woman, and the patience of her friends being exhausted, they requested that the midwife should send for further assistance, and I was accordingly called up to her, between one and two o'clock in the morning of the 14th.

When I arrived at the house, the midwife informed me, that the child's head had fallen so low into the pelvis, that the vertex was actually protruding through the *os externum*,

* The Editors feel much indebted to Dr. Kentish for his liberal observations on the application of modified temperature to animal bodies. On this subject, which is undoubtedly of considerable importance as a curative process, they hope to be the medium for conveying information to the medical public; and as Dr. Kentish is devoting a particular attention to it, they have a reasonable expectation that he will occasionally favour them with remarks on the mode of application, and on the facts that may result from such application. The Hon. Basil Cockrane is still pursuing, with ardor, his experiments with the Vapour Bath; and it is said, greatly improving his apparatus. As this gentleman proceeds in his investigation, the Medical and Physical Journal will not be inattentive to the facts that may arise.

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and that she expected it to be born in a few more pains: she acknowledged, however, that the pains were become less efficacious during the last two hours, and that the labour had not advanced since; and she conjectured with much appearance of reason, that this diminution of uterine action was occasioned by the bladder being full of urine, as the patient had made no water during the whole continuance of the labor. On hearing this report, I laid my hand upon the abdomen, and clearly distinguished by the feel, that the bladder was very full; I concluded therefore, that there would be nothing more to do than to introduce the catheter, and empty the bladder, after which it was to be expected that the pains would recover their former strength, and that the delivery would be accomplished without any further difficulty.

The patient being therefore placed in a convenient posture, I proceeded to introduce the catheter; in doing which, I found that the child's head was as the midwife had stated, so low in the pelvis, as to render it almost certain, that a few pains would expel it; but on passing my finger into the vagina, it [the vagina] felt so excessively hot and burning, as convinced me that the delivery ought not to be trusted to the efforts of nature, but that the child must be removed with all proper expedition, as otherwise there was great reason to apprehend that mortification and sloughing of the vagina would ensue. It was however first necessary to draw off the water; I therefore introduced the catheter as gently as possible, (notwithstanding which, it gave her very great pain, from the inflamed and irritable state of the *meatus urinarius)* and drew off nearly a quart of very high-coloured urine. In a short time afterwards I introduced the forceps, and delivered the woman of a female child, which was restored to life with considerable difficulty. In rather less than twenty minutes the placenta was expelled, and a profuse discharge from the uterus took place at the same time. She now had an opiate given to her, and I left her with very strict injunctions respecting her diet and management.

Before twelve hours had expired, I received information that this patient was suffering great pain from a constant urgency to make water and an inability of voiding it. I therefore again had recourse to the catheter, and emptied the bladder. The orifice of the *meatus urinarius* was swollen and tender, and the passing of the instrument occasioned her much pain; but the sense of heat and burning in the vagina was much diminished.

The usual emollient, aperient and anodyne remedies were employed to relieve her complaint; but it was necessary to have constant recourse to the catheter for eight or nine days, at

at the end of which time she began to pass her urine naturally; but she now entirely lost the power of retaining it, and suffered the various inconveniences which accompany an incontinence of urine. I began therefore to fear that an ulceration had taken place, and had made a communication between the bladder and vagina; but after a very accurate examination of the parts on two different occasions, I was fully satisfied that no such accident had happened. During the course of ten or twelve days this continual discharge of urine continued, notwithstanding the use of a variety of remedies that were employed to counteract it; at length I determined to try the effect of the uva ursi, and accordingly prescribed a scruple of the powder to be taken three times a day. After a few days, Mrs. Chapman thought she derived benefit from this medicine, and was therefore very willing to persevere in its use: it was continued for a fortnight longer, by which time the incontinence of urine was removed, and her health and strength perfectly restored.

It has been laid down as a rule in practice, and it is one of those rules, which, being founded in reason and experience, ought not lightly to be deviated from, that the head of the child should be in a situation capable of being delivered by the forceps, for at least *six hours* before they are had recourse to. As a means of guarding against a rash and unnecessary use of instruments in the practice of midwifery, this rule is highly commendable; but a rigid observance of it, in the case I have related, would have proved extremely injurious, if not fatal to the patient, as it is apparent that a very high degree of inflammation in the vagina, and parts adjacent, was just upon the point of taking place: and had the head of the child been suffered to remain there much longer, so much inflammation must necessarily have come on, as might have proved uncontroulable. It may be said, that when the bladder was evacuated, the pains would have returned; but it is possible that the return of uterine action might not have taken place for many hours, and in the mean time incalculable mischief would have been going on; upon the whole therefore, I am persuaded that this was one of the cases in which it was prudent to break through a useful rule in practice.

A relaxation, or want of contractile power in the *sphincter vesicæ*, is sometimes observed after a suppression of urine, arising probably from the frequent introduction of the catheter, and consequent dilatation of the parts; but the incontinence of urine rarely proceeds to so great a degree as in this patient, nor does it last so long. I was led to the use of the uva ursi from the celebrity it formerly attained as a remedy

medy in the disorders of the urinary organs in the practice of *de Haen*, and other German physicians. A blister over the sacrum would perhaps have been a more speedy remedy, but the constant discharge of urine had produced so much cutaneous inflammation all over the lower parts of the body, as to render the application of a blister unadvisable, at least in the first instance; and as the woman was daily mending under the use of the uva ursi, I was afterwards unwilling to discontinue it.

The uva ursi, as a remedy in disorders of these organs, is almost entirely fallen into disuse. It has experienced the fate of many once celebrated and fashionable articles of the Materia Medica; having at first been too highly and unjustly extolled, it has now perhaps sunk into unmerited oblivion. Lewis, in his "Experimental History of the Materia Medica," says of it, "In all cases that have come to my knowledge, it produced great sickness, and uneasiness, without any apparent benefit, though continued for a month." It is probable that in these cases the uva ursi was given in too large doses, for I observed no such ill effects in the doses I prescribed for Mrs. Chapman.

TO DR. LAMBE.

THE respect Mr. Royston feels for Dr. Lambe, cannot be lessened by any difference in opinion. A mis-statement of a fact, even from inadvertence, requires, however, some apology. In the present instance,* if Mr. Royston has wrongly represented Dr. Lambe's directions with regard to the use of *raw vegetable food*, he has been misled by what he deemed a publication of considerable authority. Vid. Ann. Med. Rev. vol. ii. 148. To the great object of Dr. Lambe's investigation, the relieving human nature from *Carcinoma*, the most dreadful of its calamities, the *Medical and Physical Journal* will ever open its pages with alacrity: neither will its EDITORS hold themselves justified in endeavouring to employ wit and sarcasm, for the repression of inquiry. Though they do not feel bound to approve every opinion that may come before them; yet, when the motive is the improvement of a science of undeniable utility, they hope always to be governed by a liberal regard to the feelings of an author; and by an honest desire to give a candid statement of his sentiments.

* Med. and Phys. Journal, No. 140, for October, 306.

Violent

Violent Operation of the Eau Medicinale D'Husson.

For the Medical Journal.

THE following instance of the violent action of a nostrum called *Eau Medicinale D'Husson*, is communicated to the Editors, by ROBERT ADAMS, Esq. Surgeon, Charlotte-street, Fitzroy Square.

ABOUT the 18th of December last Mr. Adams was called to a person who had taken the *Eau Medicinale*, and who was then suffering under most alarming symptoms of its effects. The patient, a Fishmonger near St. Martin's-lane, had taken two doses of the nostrum: these produced syncope, cold sweats, extreme prostration of strength, excessive evacuations from the stomach and bowels, accompanied with a pulse scarcely perceptible, and a degree of insensibility that indicated the approach of death. By the active employment of the most powerful cordials, his dissolution was, however, prevented: but he is still suffering from the operation of the remedy.

It is proper to remark that this person was, at the time of taking the *Eau Medicindle*, an athletic man, subject occasionally to be disordered with regular gouty paroxysms, the disease always appearing in the extremities. When he took the medicine he had gout in his feet only, but on the 20th, two days after its administration, the disease appeared, with unusual severity, in his hands and head.

There are circumstances of great importance in this case. The remedy endangered the patient's life, and his disease was seriously encreased; and now, ten months after taking the nostrum, his system remains in a state of great debility.

October 17, 1810.

Cases of the Fever which prevails near tho Drowned Lands, in Orange County, state of New-York, in a letter from PETER H. COLE, *House Physician to the New-York Hospital, to Dr.* MITCHILL, *one of the Physicians of that Institution, dated January 1st,* 1810.

SIR,

As you requested, I transmit to you the cases of the patients labouring under fever from the Drowned Lands, near the Wallkill, which were received in the New-York Hospital, during the late term of your attendance. There is a peculiarity in them that, as you early observed, renders them worthy of a more distinguished place in medical history. The persons suffering under this disease have a yellowish or sallow complexion and eyes, and a certain haggard or ghastly look, very distinguishable from other maladies. These are so familiar to me, that I can, almost to a certainty, decide upon them when I meet them in the streets.

These low grounds, where the patients sickened, are in the immediate vicinity of the Wallkill. From their situation, lower than the outlet of the river, they have been subjected to inundations, and are almost always wet and marshy. Their extent amounts to many thousand acres. The bottom is a fertile mould, admirably adapted to the raising of hemp.

The draining of this valuable tract, called the "Drowned Lands," has been undertaken by a company under Legislative authority. Considerable progress has already been made in the work, which, though arduous, promises great advantage to private property, and a signal improvement of the public health.

The region, however, has been famous for its unhealthiness ever since the settlement of the country. During the hot season, copious exhalations fill the atmosphere, from solar evaporation; and then are precipitated in dense fogs, which gather during the latter part of the night, and overhang the earth until dissipated by the heat of the morning.

There is something very deleterious imparted to the atmosphere from this swampy surface, and it acts noxiously upon the human body during the time of sleep between midnight and sunrise, and during the hours of waking and fasting, until they get their first meal, or the cloudiness disappears. Indeed, few constitutions can long endure its malignity. Some of the most sturdy labourers are overpowered by it in a few days; and he has stouter nerves than commonly fall to the lot

of man, to withstand it many weeks. The temptation of liberal pay draws to this unwholseme region a crowd of hardy labourers. As they sicken and become disabled, a new set is ready, under the same inducement, to take their places. These stand as long as their strength lasts, and in their turn, are succeeded by fresh hands. And by these means, the important and desirable work of draining the Drowned Lands, is carried on.

It is proper to observe, that in addition to the high wages, are included board and lodging, with a daily allowance of about a pint of whiskey. This appears to have been entirely consumed, and many of them have been known to buy an additional quantity from the retailers.

The disease which I have described cannot fail to afford instructing analogies with fevers which arise in the sea-ports. Indeed, the conclusion seems irresistable, that febrile diseases, whether arising in the interior situations, or on the sea coast, are of kindred natures; and run into each other by shades and gradations, better known to the experienced observer in practice, than capable of being reduced to the rules of nosology.

In the cases I have recorded, the facts were derived from the mouths of the persons respectively, while they were under your prescription. The general debility, the anomalous form of fever varying from the continued to the quotidian and tertian, the indications of disordered liver and spleen, the yellow hue of the skin and eyes, the occasional dropsical effusions, together with the obstinacy and violence with which the disease harassed those whom it invaded, are matters of prominent regard in its history. If the account I give you shall afford any thing new in medical research, or shall have delineated in a way that is in the smallest degree instructive, the endemic distemper of that noted district, I shall think the pains I have taken are well rewarded.

Case I.

William Holmes, Englishman, aged 37—has been four years in the United States, chiefly in Boston, as a hardware dealer. Went to the outlet to work in June, and continued to labour for six weeks, at twelve dollars a month. He laboured with a crowbar and spade, and in carrying stones. Was then seized with anorexia, nausea, headach, and pains in the back and limbs. After a week's lingering, with loss of appetite, and increasing debility, he came to New-York, by the way of Goshen and Newburgh. After a week's continuance in Batavia-lane, he was received into the Hospital

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on the 11th August. At that time he had become so much debilitated that he could scarcely walk. His ankles were œdematous, and there was a troublesome pain in the left hypochondrium. His febrile symptoms were exceedingly anomalous, and the paroxysms, which had never been preceded by chilliness while he was in the country, assumed, sometimes, the type of a coldish stage, which terminated in a hot and sweating stage, of irregular returns, after his reception into the Hospital.

He took a mercurial cathartic, was blistered over the left hypochondrium, and ordered columbo and ginger, decoct. cort. peruv. and acid sulph.; under which remedies he has gathered considerable strength. His recovery proceeded gradually, under the above remedies and occasional emetics, until the 15th October, when his mouth became affected by the use of mercurial purgatives, which removed the occasional chills, swelled feet, and pain in the left hypochondrium. He was discharged, cured, Dec. 4th.

CASE II.

Patrick M'Gennigal, Irishman, aged 30—has been about four years in the United States. Was at the drowned lands last year, and was taken sick after nine weeks labour, at twelve dollars a month. The form of the disease was that of a quotidian and tertian intermittent, commencing with a cold and shivering fit. Notwithstanding which, he continued labouring long enough to make up the whole of three months work, by returning to service as soon as a cessation of the disease, from time to time, would permit. After this job was over, he was troubled with the paroxysms, by intervals, during the whole winter; sometimes escaping it for a week or more, and seized with it again. Notwithstanding all this suffering, he engaged in the employ, once more, this season, for the lure of fourteen dollars a month. He began to labour about the beginning of August: his employ was ditching, digging, and carrying earth and stone. While he was engaged in this business, he was frequently immerged in mud as high as the knees; and sometimes, when making the dam, he was in as deep as the waist. This year, he was taken sick about the 10th August. The first symptoms were a swelling of the legs and general debility, afterwards a chilliness and shivering, followed by severe hot fits. These recurred every day, for about fourteen days, when he removed to New-Windsor. There he languished for three weeks; the disease assuming the tertian type, and finding himself rather better, got on board a sloop and came to New-

York. From the sloop he came straight to the H[illegible]al. Was admitted on the 8th Sept.

His situation was still febrile, with daily returns of his cold and hot fits. His legs, thighs, and body were swelled, with anasarcous effusion. There was heaviness and pain in the right hypochondrium; an uneasy sensation in the shoulder, and under the scapula of the same side.

For this patient, cream of tartar, in small doses, was for some time pursued, with little benefit. On the 20th he was put upon the use of the following decoction, rad. seneka ℥ij. bac. juniper ℥i. fol. digital gr. x. aquæ fervent. ℔j. Simmer them for a few minutes, and after being strained, he took two table spoonfuls every hour, increasing the dose according to circumstances. Under this, absorption took place, and much evacuation by urine was the consequence.

On the 24th he took a pill composed of calomel gr. 1, pulv. scillæ gr. ij. three times a day. Under this, a further discharge of the accumulated water took place, and the hepatic disease was considerably relieved. Under the operation of this remedy, his mouth, in seven days, grew sore.—Since he was put upon the decoction and pills, he has had no return of the febrile fits. The salivation began about the 1st October, and during its continuance, he gradually and sensibly mended. On the 14th, a blister was applied to the affected side, which has removed the greater part of the remaining pain. He was discharged, cured, on the 23d October.

Case III.

Martin Joyce, Irishman, aged 33—has been eleven years in the United States. Chiefly engaged as a seaman, in Portsmouth and Boston. Arrived at the Drowned Lands 15th August, induced by the wages, of being found and paid fifteen dollars a month. Was engaged in hauling rocks beside the ditch or drain. Was taken sick on the 11th day after he began to labour. His symptoms were headach, pain in the back and limbs, and continued fever, which lasted seven days, when he was seized with a chill which was severe, and was succeeded by a hot and sweating stage. Since that time he had a daily return of the fit in the form of a regular quotidian until the 10th October.

After lingering about three weeks near the Drowned Lands, he came to New-York, by the way of Goshen and Newburgh. On the 3d October he was received into the Hospital.

His paroxysms had regularly invaded him while he travelled. After his first seizure he had taken an emetic, a cathartic,

cathartic, cort. peruv. and wine, besides a variety of popular remedies.

When received into the Hospital, he complained chiefly of the severity of his paroxysms, and of the debility caused by them. The remedies employed were decoct. cort. peruv. and serpentar. arsenical solution, and anodyne draughts to prevent the severity of the paroxysms.

His paroxysms continued to visit him, in the quotidian type, until the 14th October; they then left him until the 24th, when they returned with great irregularity until the 1st November, when it left him. He was discharged cured on the 18th November.

Case IV.

Thomas Burns, Irishman, aged 30—has been in the United States about four years, chiefly employed as a seaman, from the port of Boston. Fearing impressment from the British, if he went to sea, he concluded to go to the Drowned Lands; and arrived there in the beginning of September. He laboured there sixteen days, for fifteen dollars a month, at digging and wheeling earth, but not exposed to the water, above the ankles. The water was warmish and not cold like spring water. He left this place and went to Wardsbridge, and was taken sick at the end of the first half day. The first symptoms were headach, want of appetite, pain in the back of the neck, and chilliness; then fever and sweating, as usual, succeeded. The paroxysms returned every day. After five days recurrence of fits, came in a waggon to Newburgh, whence he came to New-York in a sloop. He arrived on the 2d October, and was received into the Hospital the same day.

At that time, he was visited every day with a chill and fever; rheumatic pains in the back and shoulders, and complained of soreness, and aching in the left hypochondrium, about the region of the spleen.

He took an emetic, cathartic, and several of Dover's powder opiates were administered to check the onset of the paroxysms; and cort. peruv. given at the intervals.

His paroxysms returned at irregular periods, sometimes every other day, and at other times every sixth or seventh day. He was discharged cured on the 29th November.

Case V.

Thomas Boyd, New-Yorker, aged 36, labourer; went to work at the Drowned Lands on the 19th August, and laboured

laboured there on the dry soil, with the barrow and drag. At the end of the fourth week after his arrival, he was seized with pain in the head, giddiness, want of appetite, pain in the left hypochondrium, and fever. After three days he experienced a chill. This returned every other day, and was succeeded by regular hot and sweating stages.

He then left the place and returned to New-York, by the way of Goshen and Newburgh. He arrived here on the 1st October, and was received into the Hospital on the 7th, having staid at a house near the Fly-market in the intervening time, and suffered paroxysms each alternate day.

On being admitted, he complained of loss of appetite, headach, general debility, and tertian paroxysms. On the 10th the paroxysms became quotidian, and continued to recur daily until the 14th, but though they came on more frequently, they were less violent.

The remedies were an emetic, diaphoretic powders, arsenical solution. decoc. peruv. with serpent. and acid sulph.

His fever continued in the form of a quotidian and sometimes tertian type, until the 18th November. His appetite and strength improved rapidly. He was discharged cured on the 4th December.

Case VI.

James Derrick, Irishman, aged 29—has been eight years in America, chiefly in New-York, in the occupation of a carpenter. He arrived at the outlet, five miles from Goshen, the 8th September, and was to receive fourteen dollars a month. He was employed at the barrow and drag; and was taken sick on the 15th. He had no chill, but anorexia, pains in the head and limbs, and a kind of feverishness, which for several days permitted him to do partial labour. Finally, however, he was obliged to give it up. On the 5th October, he came off, and proceeded, on foot, by way of Goshen, to Newburgh, from whence he arrived in a sloop at New-York on the 7th, and was received into the Hospital on the 10th.

He took an emetic and a peppermint draught before he left the outlet.

He complained, on being received, of pain in the breast, and of general exhaustion. On the 14th he, for the first time, experienced somewhat of chilliness. Under the application of a blister to the breast, a mercurial cathartic, diaphoretic powders and decoct. cort. peruv. and serpent. he is doing well.

His fever, during the present month, assumed in a considerable degree, the continued form; at intervals quite delirious,

lirious, and in action resembled an idiot. About the beginning of November dropsical swellings appeared in the legs and feet, which were shortly removed by the free use of crem. tart. digitalis and squills. Cort. peruv. used freely to restore strength. Was discharged cured Nov. 19th.

CASE VII.

Patrick Hanling, Irishman, aged 43—has resided in New-York about 22 years. Went to work at the Drowned Lands about the 10th September, in company with six others, to take the benefit of fourteen dollars a month as wages. Was employed as a digger and ditcher, and much of the time was in the water up to the knees. On the 10th day of his labour was seized, while at work, with severe headach, pain in the back and limbs, and was obliged to leave off and go to bed. Then came on a violent chill, which made him wish for all the blankets in the house to cover him. This was followed by a hot and sweating stage. The fits returned every day for nine days. He then came to Goshen, thence to New-Windsor, and from thence to New-York, where, after continuing about a week in lodgings in Ferry-street, he came to the Hospital. In the latter place he took an emetic, cathartic, and some doses of cort. peruv. by which he was so far relieved that his paroxysms left him.

He was admitted October 13th, complaining of universal debility and griping pains. His pains abated in a little while without any remedy. He was put upon the use of cort. peruv. for his debility. He was discharged cured the 28th October.

CASE VIII.

John Riley, Irishman, aged 40—has been nine years in America, chiefly in New-York, in the capacity of a labourer. He arrived at the outlet about the 9th August, with three in company, and was to have fourteen dollars a month. He was employed at the barrow, dry digging, and crowbar. He was seized about the 9th September, with pain in the head and extremities, which was followed with a severe chill, that commenced about noon, and was succeeded by a hot and sweating stage. He continued working by the half day, notwithstanding his return of fever every day. A few days before he left the outlet his fever put on a tertian type. His appetite was vigorous at the beginning of his sickness, but was losing as the disease advanced. After working about two months at the outlet, he came to New-York by the way of Goshen and Newburgh. He took an emetic while there.

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He was received into the Hospital on the 17th October with a tertian intermittent; pain from the left clavicle, extending down to the region of the stomach; cough, some difficulty of breathing, and great debility. He attributes the pain and cough to exposure to cold while on board of the sloop on his passage down the river. On receiving him he was bled, blistered, and took powders composed of glauber salts and ant. tart. which soon removed his pain, cough, and difficulty of breathing. He used the decoct. cort. and serpent. His strength improving very fast, he was discharged cured on the 24th October.

Case IX.

James Cole, Irishman, aged 27, seaman; has been in America about seven years; sailing partly from New-York, and partly from Portsmouth. Arrived at the Drowned Lands about six weeks ago, and worked about five miles from Goshen. His occupation was brickmaking. In a fortnight after he got there he was taken ill; was seized with a chill while at labour. This was followed by a violent fever, and profuse sweating. The fever lasted about three weeks without any recurrence of the chill, and was of the continued kind; then the shivering returned, and he has suffered a daily paroxysm, regularly from that time to the present.

While there he took an emetic and a cathartic; and no other medicine, either then or since. Finding himself exhausted too much to work, and being destitute of money, he got in a waggon and came to New York, through Goshen and Newburgh. He got to town in a sloop on the afternoon of the 22d, having had his fits every day during the voyage. He had no symptoms of dropsical and hepatic affection; but the bilious and woeful countenance is strongly marked in him, and in addition to his weakness and quotidian attacks, complains of pains and increasing heaviness in the left hypochondrium, which obliges him to lie on the right side.

He was blistered over the left hypochondrium. He also used the Peruvian bark in different forms, and occasionally emetics, with very little relief. He was then ordered the calomel pill, which affected his mouth, and caused the fever to disappear. He was discharged cured on the 16th December.

A Case of Disease, supposed to arise from Poison, attended with extraordinary Symptoms By Dr. ARNELL, *Secretary to the Medical Society of Orange County.*

LITTLETON, a servant man, belonging to Mr. William Phillips, aged 26 years, generally of a healthy appearance through life, began to complain in the month of September, 1806, at distant intervals, of slight nausea, and sometimes vomiting, but so trifling, as not to excite much attention. In October, the aid of a Physician was requested, who found him labouring under the above symptoms, increased, and accompanied with slight strabismus, but without any visible dilation of the pupil, and a slight obtuse pain in the head, attended with drowsiness and lassitude of the system, pulse natural, appetite somewhat impaired, bowels regular, sleep a little disturbed. The general course of prescriptions through this month were, 1st, Emetics, without relief; 2d, Cathartics, and 3d, blood letting, equally unsuccessful. In the latter part of this month some of the symptoms became materially increased, to wit, nausea with frequent disposition to vomit, strabismus, cardialgia, appetite bad, a slight disposition to diarrhœa with tenesmus, sleep disturbed with frightful dreams, urine a little turbid, pulse natural, pupils of the eye not visibly dilated. Prescriptions during this period were, cathartics, of different kinds, blood letting, and epispastics behind the ears; all without any visible effect for the better. In the fore part of November the foregoing symptoms became materially increased; an almost constant retching to vomit, tenesmus, and diarrhœa extremely distressing though little discharged, slept very little, started often, screaming as if terrified, strabismus much increased, pulse regular, epistaxis frequent, blood buffy, appetite entirely gone, obtuse pain in the head. The predominating symptoms agreeing so well with those described by Dr. Quin, on Hydrocephalus internus, led to a conclusion that water was collecting in the brain. The patient was strongly impressed that some kind of poison had been given him by a female servant, and in consultation with three gentlemen of the faculty, we became divided in sentiment; it was therefore considered adviseable, in some measure, to alter the prescriptions, and consider poison, some time past administered, as constituting the cause of his disease. Epistaxis more frequently occurring, recourse was had to more frequent blood letting, but without checking it, except for a few minutes, and though he was often bled until near fainting, the pulse became but little weaker, and that for a short time.

Alkalines, in small doses, were often given, but without effect, and the warm bath made use of with as little success. At this period the pulse was about 80, and rather tense, but the strength of the patient appeared rapidly failing; the disposition to vomit became less with an increase of tenesmus, pain of the head somewhat diminished. About the 10th of November the loss of sight was almost total, sleep much disturbed, epistaxis almost constant, strength rapidly failing, pulse rather weaker than in health, number about 80; cardialgia, attended with extreme anxiety and uneasiness of the whole body; these constituted the most prominent symptoms during the last days of his illness. Dr. Phillips, who was present during the last moments of life, bled him twice on the last day; the blood showed an inflammatory crust. The epistaxis continued from its commencement till his death; blood letting once and twice a day was resorted to, as the strength of the patient would admit; the pulse continued regular, and about 80 strokes a minute, till within fifteen minutes of his decease.

From the extraordinary and peculiar circumstances of the above complaint, it is to be regretted that an exact statement of the symptoms and treatment had not been made from its commencement; but the disease assumed a more formidable and interesting appearance than was at first contemplated.

His master being in New York when he died, I could not obtain liberty to dissect him until his return, which was 83 hours after his decease: when the following were the appearances upon dissection.

No external appearance to characterize any disease; no putrid effluvia, no purple or livid spots, no unusual appearance of the genitals; the epidermis was close and firm, the hair firmly fixed in the scalp, abdomen not in the least tumid, but perfectly collapsed as when he first died. On dividing the integuments of the cranium they appeared white, sound, and perfectly natural. On removing the integuments and the upper part of the cranium, nearly horizontally, the blood-vessels of the brain appeared very turgid, and exhibited strong marks of inflammation; two small vesicles of water appeared on the superior lobe of the left hemisphere of the brain, just beneath the pia mater. After dividing the two hemispheres through the falx, and corpus callosum, down to the cerebellum, two transverse incisions were made through the cerebrum horizontally, so as completely to expose the right and left ventricles; there was no collection of serum or any other fluid. On laying open the abdomen, the intestines appeared sphacelated in detached portions through their whole extent. The mesentery was quite putrid, but the integuments and muscles appeared entirely sound, shewing no signs of gangrene. The stomach

stomach was quite empty, its external appearance quite uniform, shewing no more signs of decomposition than might be expected, considering the time since his death. On opening the stomach, the internal coat appeared to have considerably suffered from inflammation, was uniformly sphacelated, and very much so in comparison with the external or muscular coats.

If I had not been disappointed in finding water in the ventricles of the brain, my impressions would have remained, that his case was hydrocephalus internus; but as it was, the symptoms and appearances, upon dissection, do not agree with those which take place after taking poison, nor any other disease marked by nosologists. I am perfectly at a loss where to rank it, but am convinced that it depended upon too great excitement of the system, and am satisfied with the treatment. It may not be improper to remark, that I have, in two instances, the last summer, cured the epilepsy with the acetate of lead and sal. martis.

An Account of the efficacy of Blood-Letting and Cathartics in the cure of Palsy, with Observations on that Disease; communicated by Dr. HUNTING SHERRILL, *of Clinton, Dutchess County, (N. Y.) formerly resident in the New-York Alms-House, to* EDWARD MILLER, *M. D. Professor of the Practice of Physic in the University of New-York. Dated June 30th,* 1810.

THOSE who have made examinations of the brain, after death, in persons who have been affected with palsy, have ascertained that there is, generally, a compression of the origin of the affected nerves; owing to an extravasation of blood, or an effusion of fluid in some part of the brain. This observation is supported by a number of writers, among whom may be mentioned John Hunter, Townsend, and John Bell. And this appears to be the immediate cause of the nerves, and muscles dependent on them, having lost their power of action. Any case of palsy, where the nerves are injured or compressed, after they emerge from the brain, is not included in this account. In injuries of the head from external violence, where there is a compression of the brain by a depression of the skull, an extravasation of blood, or a collection of matter within the cranium, surgical writers agree that palsy, more or less extensive, is a common symptom, and experience confirms the remark.

Many of the symptoms exhibited by a patient, labouring under hemiplegia, or any considerable, extensive attack of

 palsy,

palsy, are very similar to those produced by compression of the brain, from local injuries of the head. Both are attended with distress in the head; in both the mental faculties are, generally, somewhat impaired, or are affected, in some degree, with stupor; and both have paralytic affections of the muscles, and they have a striking similarity in the state of the pulse. The practice of surgeons in those cases of local affections is established and uniform. They proceed to remove the compression by applying the trepan, elevating the depressed bone; discharge the blood, which is extravasated within the scull, or the matter which may have collected there; and which commonly affords almost immediate relief of the paralytic symptoms; or if it should not be thought adviseable to use the trepan, (as is frequently the case,) he has recourse to remedies which answer the intention in a more indirect manner, and at the same time prevent inflammation, which are such as those of the depleting class. From the apparent similarity of the effect on the origin of the nerves in the brain produced by those two different causes, we would infer that a similarity of treatment might rationally be adopted in palsies not arising from local causes, to that used to remove an oppressed brain from local injury; with this difference, that while the surgeon, with his instrument, goes directly to the seat of the complaint, and removes the immediate cause by a manual operation, the physician must take a more circuitous rout, and accommodate his remedies to the state of the system, so as to carry off the compression by slow absorption from the brain, to relieve the affected nerves. Conformably with these principles, I made use of some remedies, which it appeared were directed to the true pathology of this disease, in several cases which came under my care in the New-York Alms-house in 1808, the principal of which were blood-letting and cathartics. I was warranted in using blood-letting from its being indicated by this pathology of the disease, and from the states of the pulse noted in the annexed cases; in all which, Dr. Rush would recommend blood-letting, under certain circumstances; (see his *Defence of Blood-letting*,) and from the following observation in Hunter on the Blood, part 2, chap. 1. In palsy, he says, "We ought to bleed at once very largely, "till the patient begins to show signs of recovery; and to "continue it till he begin to become faintish." By accommodating this remedy to the morbid actions of the arterial system, without having particular reference to the name of the disease, there appears to be no impropriety in continuing it as long as the state of the pulse and continuance of the symptoms indicate it.

Cathartics

Cathartics are used to promote absorption from other parts of the body in a variety of cases. Dr. Rush informs us, that he has long observed their good effects in palsies, and other cases of congestion in the brain; with this intention, they were used to relieve the oppressed nerves.

The following cases, selected from my case-book, will show the result of this method of treatment. It will be seen that the usual local remedies were used in the most of them, as likewise occasionally galvanism and electricity; but in a number of similar cases, where these were used alone, they appeared to afford very little permanent benefit; and they are probably useful only as auxiliaries to remedies which have a more general effect on the system. It will also be observed that these were principally recent cases. What effect this treatment may have on those of long standing, time and observation alone will determine. From its effects on No. 2, it is more than probable that it may be of service in some of them.

Owing to the obliging disposition of the visiting physicians, Dr. Hosack, and Dr. M'Nevin, these cases came solely under my management.

No. 1.

——— Baxter, aged about 60 years, was attacked with a paralytic affection on the 15th June, 1808, which affected the right arm, hand, and side of the head, attended with considerable headache. It deprived her of the use of the arm and hand; speech was slightly affected; pulse small and firm. She took a cathartic of sub-muriate of mercury, gum aloes, gum gamb. āā gr. viij, and used stimulant friction to the limb. The cathartic produced several evacuations from the bowels. The next day she felt somewhat relieved of the headach and numbness. On the second day the cathartic was repeated. She continued to convalesce. She was electrified once, but so disliked the sensation it produced, that she would not submit to it a second time. The cathartics were repeated once in about three days; the local remedy omitted. In about ten days all the symptoms left her, and she enjoyed the full use of her arm.

No. 2.

James Travis, aged 49 years, was admitted into the Hospital October 28, 1806, with a hemiplegia. When admitted, as I was informed, he had no use whatever of the affected side; was helpless and entirely speechless. By the use of the treatment which had been employed, he had recovered a partial use of his speech; could hobble across the floor indifferently,

differently, with assistance; and could give his arm considerable motion. June 20th, 1808; for about six weeks past he has been under a course of treatment recommended by Mr. Rowley, in his treatise on diseases of the eyes, p. 23, consisting principally of mercurials, antimonials, camphor and aloetics, given together or separately in small doses, with vesicatories and stimulants externally; from which, however, he derived no benefit whatever. Several months previous to this, he had been under no particular plan of treatment; pulse small, full and tense; he was bled to sixteen ounces; it nearly produced syncope; pulse better after it; thinks himself better; in a week the bleeding was repeated to 20 oz.; effect as before; he was electrified, and used local stimulants: he walked better and raised his arm higher than ever before since his attack. In another week, has taken 2 or 3 cathartics of sub-muriate of merc. gum gamb. gum aloes, āā gr. 10; they produced several discharges, but were not excessive; bleeding repeated to 24 oz.; slight syncope ensued; gains more use of his limbs. In a week, again; pulse small and tense; bleeding repeated to 24 oz.; syncope ensued; the blood contained yet as great a proportion of crassamentum as at any of the former bleedings; continues friction, with tinct. canth. In two weeks more, has taken cathartics once a week; walks indifferently without a staff; with difficulty, he can raise his arm as high as his head; pulse small, but considerably tense; was bled to 20 oz.; no particular effect ensued; was galvanized daily for two or three weeks, by receiving sparks from Mr. Cruickshank's galvanic trough. It was omitted, principally, for want of time; from the multiplicity and variety of cases that required attention. The depleting plan was continued 5 or 6 weeks longer, but with not so great a degree of steadiness; during which time he was bled 4 or 5 times, and took several cathartics, but did not derive the benefit from it, which he had done, though he gained somewhat. The disease proving obstinate, and the prospect of succeeding being somewhat gloomy, the case was given up; at which time he could walk without a staff, raise his hand to his head with ease, and enjoyed good general health. He remained in about this situation, until about the first of October 1809, during which time he used no particular remedies, as he informs me. Since which, he has gradually lost considerably the use of his limbs again.

No. 3.

D—— M'Lain, aged 28 years, a native of Ireland; was brought to the Alms-house, on a cart, on the 8th July, 1808, completely helpless, from a paralytic affection of the left side. The

The left arm and leg hung motionless. Had considerable stupor, and a numbness of the whole left side, and of the tongue; he was entirely deprived of his speech; could only make an imperfect guttural sound. By signs and expressions, it was ascertained, that he had little or no pain, except in the head, and some distress in the region of the stomach. The attendants who came with him informed me, that he was suddenly attacked with those symptoms on the 4th of July in the morning, previous to which he had enjoyed good health. His pulse was small, slow, and tense. An emetic was given on the 9th, which discharged a quantity of foul mucous matter from the stomach; emetic was repeated on the 10th and 12th, and rubefacients, with friction, daily; by which his tongue, and the distress at the stomach were somewhat relieved; pulse became more regular. He was now put on a course of cathartics, composed of sub-muriate merc. gum gamb. gum aloes, āā 10 gr.; their operation was pretty brisk, but not excessive; they were repeated once in 4 or 5 days; sometimes, however, the gamboge was omitted; at others, the aloes, and sometimes jalap or rhubarb was substituted for one of those. Rubefacients were continued, and were occasionally varied from one article to another of that class. Aug. 1—he had recovered the use of his speech, so as to converse somewhat intelligibly; the use of his leg, so as to move it in any direction, and a trifling power of moving his arm; pulse small and tense; appetite and general health rather improved. Complaint has remained stationary for ten days past. He was now bled to 16 oz. which induced a disposition to syncope; other remedies continued, but the cathartics not so often. After the bleeding, the pulse better; bleeding was repeated, whenever the pulse became preternaturally tense, or so much so as to bear the lancet, which was about once a week. The quantity of blood taken, at each bleeding, was from 12 to 24 oz. He was galvanized through the affected parts. Sept. 1—has been gradually recovering, since pursuing this plan; begins to walk about the ward with a staff; gives the arm considerable motion, and has recovered the use of his speech. The galvanism was continued but about a week, owing in a measure to the reason mentioned in the preceding case, but partly from its not appearing to come within the indication on which the case was treated. The cathartics were repeated one a week, and the bleeding once in two weeks; he was electrified occasionally, and occasionally used friction to the skin. Oct. 1—he has perfectly recovered the use of his leg, and walks about town without a staff, and converses well; has no symptom now remaining but the affection of the arm, which he can raise to a horizontal

zontal position, and make some use of it. He enjoys very good general health, and has acquired considerable flesh. Electricity was continued but a short time, being obliged to leave town; the treatment was suspended; soon after which I relinquished my situation in the House, and it has not been resumed since.—He has been under no regular treatment since, as I am informed, and remains in nearly the same situation yet.

No. 4.

A—— B——, about 55 years of age, had long been a resident of the house. Aug. 25; was attacked with a paralytic affection of one of his arms, shoulder, and side of his head; speech considerably affected; attended with headach; pulse slow and firm. He took sub-muriate merc. gum gambog. āā 12 gr.; bathed the arm with vinegar, in which mustard seed had been infused. Next day he was somewhat better. The cathartics were repeated once in 3 or 4 days. In about three weeks from the attack he was discharged from the medical department of the house, cured. To which the following case may be added.

No. 5.

Mrs. —— ——, a lady of this town, aged 27 years, of delicate habit, and slender make; about the middle of December last, was deprived of the use of her right arm and hand; attended with pain in the head, and some vertigo. Local applications were made to the affected limb, of stimulants and frictions; and she took mustard seed in small doses. This kind of treatment was pursued until the 9th February 1810, when I first saw her; at which time the symptoms had increased, so that the headach and vertigo had become very troublesome; had pain and numbness in the right side of her head and face, in the inferior extremity, and in short, in the whole right side. From these symptoms it was concluded, that she was threatened with a more general attack of the complaint. Her pulse was small, slow, and firm. Appetite somewhat impaired; she was bled 6 oz.; took a cathartic, composed of sulphate potash gr. 12, pulv. rhei. gr. 8; sub-muriate merc. gr. 5, which was repeated every 3 days. An issue was formed on the right side of the base of the os occipitis. She was using powdered mustard seed on the affected arm, which was continued. On the 17th the issue discharged; cathartics operate well; symptoms rather abated: pulse full, small, and tense; was bled to 8 oz. and the other treatment was continued. On the 20th, pain and affection of the lower extremity entirely removed. Vertigo much better; recovered

some

some use of her arm; general health improved; pulse small, tense, and slow: was bled to 10 oz.; bathe the arm with tinc. canth. daily; repeat the cathartics. March 5th—affection of the face entirely removed; arm much better; pulse tense; was bled to 8 oz.; the blood retains its usual proportion of crassamentum; and this portion, if any thing, had a larger quantity than natural. The cathartics were now taken about once a week; omitted the tinc. canth. and merely rubbed the limb. She continued to convalesce. By the 17th March, had recovered the use of her arm, except the wrist and hand; when she awoke in the night, and found herself entirely relieved of all the paralytic symptoms, and enjoyed the full use of her arm, except a slight weakness and some headach only remaining; since which, she has fully recovered.

Case of Contusion, followed by a remarkable retention of Urine: Communicated to Dr. Miller, *by Dr.* E. F. R. Smith, *Physician in the City of New-York.*

LYDIA ——, a servant maid, slipped on the ice and struck her pudenda against the edge of a board. Great inflammation succeeded, and an immediate suppression of urine took place, although in the act of going out for the purpose of voiding it. The accident occurred on the 25th of January, and on the 27th I first saw the patient. She complained of no pain, except soreness of the parts; had rested well, and was without symptoms of fever. She said she had passed no urine since the injury, except once or twice, about a tea-cup-full, bloody, and accompanied with great pain. Some of it I inspected, and found small coagula of blood, mixed with the water. Upon examination, for the purpose of introducing the catheter, the labia and small neighbouring glands were found so much tumefied and deranged, that the attempt to afford relief, in this way, proved unsuccessful. Ordered fomentations, emollient applications and rest; 28th, symptoms the same. Ordered a brisk cathartic. 29th, medicine operated well. No alteration of symptoms, except a little tension of the pulse. Took from the arm ten ounces of blood; and in the afternoon succeeded in introducing the catheter, but without obtaining more than a spoonful of water. The singularity of the case now fully appeared. Four days had elapsed since the accident, when the bladder must have been full; and in that time she had passed only about eight ounces of water, at the end of which the bladder was found empty. There was no reason to suspect

suspect an accumulation in the kidneys or ureters, else there would have been pain, and other specific symptoms; in short, it was obvious, there had been no urine secreted. Her appetite had been indulged, and she had not refrained from drinks. On the 30th, my colleague, Dr. Robson, was called in consultation, who agreed with me in opinion, that this was an extraordinary case of suspension of the secretion of urine. Symptoms same as yesterday. Passed no water, no tumefaction of abdomen, no uneasiness of any kind. Ordered a powder consisting of nitrate of potash, grs. x. submuriate of mercury, grs. ij. repeated three times a day. Saturnine application to the parts. 31st; inflammation and sense of soreness much abated; great anxiety; tense pulse; restless during night; passed no water; stomach rejected last powder; no alvine evacuation since 29th. Ordered the common enema to be administered immediately, which afforded much relief. Substituted for the powder, tincture of digitalis, twenty drops, three times a day. Directed a cathartic of calomel and jalap to-morrow morning. February 1st, complains of pain across the loins; bladder empty, but no passage of water; pulse small and tense; little appetite; cathartic, assisted by injection, operated well. Ordered tincture of digitalis, increased two drops at every dose, and a calomel pill of one grain, with a little opium, three times a day. Drink plentifully of flax-seed tea. 2nd. Pain in the loins subsided. Pulse slow and more full; passed half a tea-cup-full of transparent urine; medicines continued, with an injection daily. 3d. Gums sore; pulse slow and wirey; little pain in the lumbar region; no passage of water; continued pills once a day, tincture as before. 4th. Very uneasy, with pain about the loins and region of the bladder, increased by pressure upon the abdomen. Pulse more hurried. Introduced the catheter and drew off a pint of limpid urine, which gave much relief. During the two following days the patient continued much as the last. Drew off, each day, half a pint of clear urine. On the 6th, observed some disorder of the stomach; suppose, in consequence of the digitalis, of which the last dose was 35 drops. Directed the quantity to be diminished 5 drops at each dose, down to 10, which continue. After this time the patient was enabled to pass her urine without assistance; at first, in small quantities, but gradually increasing. She continued the use of digitalis and the calomel pill till the 24th, when she was discharged cured.

In the history of this case, the most striking circumstance is, that of the suspended secretion of urine. During the first eight days of the disease, the whole quantity of water secreted

secreted did not exceed half a pint, and in the latter four of these days, not a drop was made! That such an effect should arise from so slight a cause as an external injury to the pudenda, appears very extraordinary. There was no symptom of inflammation extending to the kidneys or even to the bladder; nor was there reason to suspect the existence of calculi in the urinary passages. Indeed, there is no possibility of accounting for the suppression of this necessary evacuation, but by supposing the function of the kidneys to have been entirely suspended. The appearance of small coagula of blood in the first passage of urine, I suppose to be owing to the injury of the external parts; as likewise the pain, upon attempting to make water, while the inflammation lasted.

I find no cases upon record in all respects similar to this. Indeed, I believe the complete suppression of urine to be a very uncommon disease. Mr. Hey, in his "Practical Observations in Surgery," mentions that he has seen but a few cases of the *ischuria renalis*, or complete suppression of the secretion of urine by the kidneys. The disease proved fatal in all his patients, except one, in whom it was brought on by the effect of lead taken into the body by working in a pottery. It subsisted three days, during a violent attack of the colica pictonum, and was then removed, together with the original disease.

With regard to the treatment of my patient, I have very little to add. In this we were almost without a guide; and the existing symptoms formed our only indications. I would remark, however, that notwithstanding a free exhibition of the digitalis, the kidneys did not show a returning disposition to their office, till the system began to be affected by the mercury. They were both continued with but little inconvenience, till the patient was discharged.

To the Editors of the Medical and Physical Journal.

Singular Effect of Belladonna in an uncommon Nervous Affection.

GENTLEMEN,

IN the month of January, 1809, Miss B. a healthy young lady, aged 29 years, received a severe blow upon the outer part of the fore arm, by the fall of a box lid. The pain was not particularly violent at the time, and a slight degree of ecchymosis was the only immediate consequence, which was

soon

soon dissipated by the application of some common remedies. In about a week, however, a fresh attack of pain was felt in the part that had been struck, and which increased very rapidly, extending upwards towards the axilla, and downwards in the direction of the supinator radii longus, but more particularly affecting the thumb and fore-finger; there was no appearance of inflammation or swelling upon the part, but a slight degree of tenderness upon pressure. Leeches, blisters, and a variety of topical applications were had recource to by the advice of a medical friend, but without affording any relief; on the contrary, the pain increased to a very violent degree, and the muscles of the fore-arm, particularly those employed in its rotation, became affected with occasional spasms, so that the arm was kept in motion for several successive hours. In this state she was recommended to come to London, and the complaint was so much aggravated by the journey, (only 36 miles), that the side of the neck and the head sympathised in the pain. Her general health did not appear to be much affected, her appetite continued good, the pulse natural, and all the evacuations regular.

During the months of March and April, the whole tribe of nervous and antispasmodic medicines were tried without effect. Opium produced only an alleviation of the pain, but had no influence upon the spasmodic contraction of the muscles; warm Baths, which were employed three times a week, had no better success, and Electricity certainly aggravated the disease: the only medicine that could be said to have been at all useful was the Cicuta; which, in large doses, certainly very much quieted the spasms, though it never overcame them entirely; it was however persisted in, till the head and stomach began to suffer from its use, and when discontinued on that account, the complaint resumed all its wonted violence, and, indeed, was perceptibly on the increase, the muscles of the arm itself taking on the same disposition, and the whole limb was thrown upwards with a most rapid and violent motion, for such a continuance of time as to completely exhaust the patient, whose only resource was in a large dose of Opium, which procured a very temporary remission of her sufferings. In this melancholy, and almost hopeless situation, on the 8th May, a solution of the Extr. Belladonnæ, in the proportion of ʒj of the extr. to ℥j of water, was applied in the direction of the nerves of the arm, at the suggestion of Mr. Copeland. When an ounce of this solution had been used, our patient began to complain of an uneasy sensation about the pit of the stomach;

mach; but as this was not attributed to the application, it was continued during the following day, until a second ounce was expended: the oppression and anxiety about the præcordia, which, during this time, had been constantly increasing, then arose to a most distressing degree, attended with a sense of weight and pressure so intolerable, as to induce her to loosen all her garments; the pulse became feeble and intermitting, and the skin cold and clammy: the convulsive motion of the arm still continued, but in a very slight degree. Under these circumstance, a warm bath was prepared, and the patient was put in at a heat of 94 degrees. In a few minutes she fainted; and when taken out, was seized with a violent hysteric paroxysm, which left her exceedingly exhausted; from that moment her arm remained perfectly free from spasms, though a new disease seemed to be induced, no less formidable than the one so recently overcome. She appeared to have lost her memory entirely, the voice was very indistinct, and her articulation imperfect; indeed, she laboured under a complete amentia. Blisters were applied to the legs, and she was directed to take the volatile alkali, combined with the assafœtida and camphor in large doses; she persisted in this plan, and in the space of a fortnight these complaints began slowly to relax, her faculties gradually returned, and she recovered the perfect use of her speech; the original disease never shewed the least disposition to return; her state of debility was, however, extreme, the slightest agitation of spirits bringing on the most violent hysteric paroxysms; and it was not till the latter end of June that she was enabled to return to her residence in the country, where she has acquired her former state of health, and with it, the perfect use of the arm. It may not be improper to add, that this case was seen in its progress by Dr. Baillie, the late Mr. Ford, and several other gentlemen of the faculty.

(Signed) J. BACOT.

Hospital, 1st Guards,
Oct. 20, 1810.

For the Medical Journal.

Upon a Singular Variety of the Human Species.

THE annexed Plate, for which we are indebted to Mr. Tresham, is a tolerably correct representation of a female lately brought to London from the Cape of Good Hope, and now exhibiting under the appellation of "*The Hottentot "Venus.*"

"*Venus.*" We offer the sketch of this singular variety of our species, from a desire of promoting useful investigation, and shall feel ourselves obliged by the correction of any correspondent who can obtain better information on the subject. The person who exhibits this unfortunate female, either cannot, or will not give any further account of the place of her nativity, than that she was brought one thousand miles from the interior of Africa to the Cape.

As naturalists, we may be gratified with the sight of a being which differs in figure from any thing we have yet observed in human shape; but when we reflect that she is taken from her friends and her country, not for the purpose of receiving the blessing of religion, or the benefit of education; not for the purpose of enlarging our acquaintance with the human race, but is confined as a prisoner, and exhibited daily at so much a head, like an Orang Outang, or any other wild animal, to the gaze of an unfeeling multitude, we are ready to ask, is humanity become an empty name, and is the boasted liberty which the meanest slave is said to possess, the moment he treads the soil of this favoured country, for ever fled from amongst us?——The poet tells us,

> " Slaves cannot breathe in England; if their lungs
> " Receive our air, that moment they are free;
> " They touch our country, and their shackles fall."

The peculiar appearance of this woman at once fixes our attention, and suggests a query interesting to the naturalist, whether the protuberance of the nates is the consequence of some diseased action, or whether a distinct tribe of human beings exists, of which such a peculiarity of form characterizes the species? To ascertain this point, application was made by one of the Editors of this Journal, for permission to view her in her natural state; but this was refused, although it had been granted to persons whose rank in life and usual pursuits secured from the suspicion of being actuated by the love of science.

She is covered from head to foot with a sort of stuff which fits close to the body; but in her own country is said to be unused to any other covering than a few beads, a bracelet, and a small *apron of modesty*. Her height is four feet five inches; she is about 20 years of age, and has borne a child. The colour of the skin is tawny; the eyes are rather small, the eye-brows are painted black, and the forehead of a vermilion tint, whilst the cheeks are thickly dawbed with black and red. On her bosom hang two shells of the small land tortoise, containing paint; these she will not suffer to be handled. The lips are thick, resembling those of a negro; and the breasts

breasts hang down low. The proportion of the arm is beautiful, the hands and fingers are small, delicate, and well turned. The thighs, legs, and feet also, are well formed, though short. She cannot speak any language intelligible to Europeans, neither does the man who exhibits her, and who was born at the Cape, seem able to converse with her except by signs. She walks or sits with ease, plays with her fingers upon a simple stringed instrument, and follows our fashion in diet. She seems melancholy, is possessed of sensibility, and at times appears indignant at the barbarous and degrading manner in which she is shewn before a gazing crowd, many of whom handle her pretty much as we see butchers when ascertaining the fatness of sheep and cattle in Smithfield market.

That the enlargement of the buttocks is not the effect of disease, seems probable, from the circumstance of the woman enjoying a good state of health, from her never expressing any sense of pain, or of uneasiness, on pressure being applied to the part; and from the facility with which she wields what appears to us an enormous and most aukward incumbrance.

Although several travellers have visited different parts of Africa, a very small portion of that extensive region has yet been explored. Our credulity has been abused with marvellous accounts of what they have seen, and these, succeeding voyagers have in so many instances ascertained to be false, that we are disposed to doubt any relation which is extraordinary, or which materially differs from the conceptions which we had previously formed. Thus, when among other wonderful stories which the interesting and amusing Vaillant has narrated in his travels in Africa, he described a tribe of people resembling the subject of this paper, his relation was deemed fabulous, and he even incurred from Barrow the reproach of having described the inhabitants, and the natural productions, as well as the geography of countries which he had never visited. His description of the Houzouanas, however, bears a striking resemblance to the female at present exhibiting in Piccadilly. He informs us, that they are a numerous people, lead a wandering life, passing great part of the year in making long journies; but that they possess a large tract of country extending from East to West, from Caffraria or Kafferland, to the country of the Great Nomaquois, or Namaaquas.

The Houzouanas are small in stature, the height of the men being about four feet and a half, five feet is reckoned tall. They are well proportioned, brave, active, indefatigable. The form of the cranium resembles that of the Hottentot, but the

the chin is more round. They are not so dark in complexion, their hair is very short and curled; their nose flattened, little more than the nostrils being visible. The eyes are large and lively. They go almost entirely naked; are very insensible to changes of weather, and dwell in huts. They are humane and sociable; but from their erratic condition, exposed to frequent warfare with surrounding tribes. Their arms are bows and arrows. The women are distinguished by an immense projection of the posteriors, which Vaillant ascertained to consist of fat and fleshy fibres, which at every movement of the body, have a singular jumping undulating motion. When travelling they sometimes place a child upon the projecting buttocks. The hands and feet of the female Houzouanas are small and pretty, and their arms beautiful. They wear sandals, cover their heads with a jackal's skin, wear a small apron in front, and leaving the other parts of the body naked. They carry about them a little box, of wood, ivory, or tortoise-shell, which contains the grease with which they anoint themselves, and the tail of some animal, with which they wipe off the perspirable matter. Their manners are simple, and pleasing, but when insulted by enemies, or provoked by famine, they are ferocious and vindictive, and have often been mistaken for Bosjesmans. The only point of dssimilarity in this description is the size of the eyes. There is a tendency in most of the Hottentot women, as they advance in years, to form fat in the region of the nates, but the protuberance has never reached the extent which is observed in the subject of this paper, neither are the Hottentot women subject to it when young. Mr. Barrow altogether discredits Vaillant's account of the Houzouanas, but he describes the women of the Bosjesmans so distinctly, that there can be little doubt that he and the French traveller differed only in the name of the tribe, a circumstance very likely to happen, where neither of those gentlemen understood the language of the people where they visited. Barrow thus describes them.

"The great curvature of the spine inwards, and extended posteriors, are characteristic of the whole Hottentot race; but in some of the small Bosjesmans they are carried to a most extravagant degree. If the letter S be considered as one expression of the line of beauty to which degrees of approximation are admissible, these women are entitled to the first rank in point of form. A section of the body, from the breast to the knee, forms really the shape of the above letter. The projection of the posterior part of the body, in one subject, measured five inches and a half from a line touching the spine. This protuberance consisted of fat, and, when the woman walked, had the most ridiculous appearance imaginable, every

every step being accompanied with a quivering and tremulous motion, as if two masses of jelly were attached behind.

In the present state of our knowledge of Africa, we cannot precisely determine the characteristic marks of every tribe which subsists in that vast country. In many instances, unquestionably, Barrow has disproved the assertions of Vaillant; but we do not think that the former writer has sufficiently explored the interior of Africa, or become so familiar with the customs and language of the inhabitants whom he met in the course of his excursions, to pronounce with certainty that the Bosjesmans whom he described in the preceding extract, were not the Houzouanas of Vaillant. At all events, it appears from their united evidence, that a people does exist with this singular form before alluded to; but one traveller refers them to one tribe, the other traveller to another tribe. From all then that has been stated by these authors, and from the appearance of the woman, at present in London, we think it may safely be concluded, that the protuberance is not the effect of disease, but is the characteristic of a distinct tribe of people.

To the Editors of the Medical and Physical Journal.

On Premature Puberty.

Gentlemen,

In the Paper giving an "Account of Philip Howorth, in whom signs of puberty appeared at a very early age," published by Mr. White, in the *Medico-Chirurgical Transactions*, Vol. 1. we are referred to one or two instances of a similar nature, in other boys; it has been asked whether such instances of premature puberty have ever occurred in the female sex, but I do not remember to have seen or heard any such referred to on this occasion. The subject, however, is curious, and may be worthy of investigation. I beg leave, therefore, to mention a publication, not generally known, in which a case of this kind, in a female, is recorded. My information is gained from Monsieur Sue's curious farrago, which he has entitled "Essais Historiques, litteraires, et critiques sur l'Art des Accouchemens," 2 tom. Paris, 1779.—Speaking of Mons. Simon's "Recherches sur l'operation césarienne," Sue says, he was likewise the Editor of a Collection, in 4 vols. 12mo. of various Tracts on Surgery, Anatomy, and the Practice of Medicine, chiefly extracted from foreign publications, at Paris, in the year 1761, in which are several papers relating to Midwifery. At the beginning of the second volume, is published a letter from Mons. Schmith, giving an account of a girl, who, at the age of eight years and ten months, was delivered of a dead child, at the full term

term, having both its hair and nails. This young mother had been *regular* ever since the age of two years, and the parts of generation resembled those of young women of seventeen or eighteen years of age.—Essais, &c. par M. Sue le jeune, tom. 2. p. 344.

Should any of your Correspondents be in possession of this publication of Simon's, they will probably favour you with more particulars of this case.

The curious and authentic history of Philip Howorth, would almost tempt one to give credit to some of the extraordinary relations of the older writers, which have hitherto been considered as completely fabulous. I take the liberty of subjoining some of these, extracted from "*An Essay on the Possibility and Probability of a Child's being born alive, and live, (living) in the latter end of the fifth solar, or in the beginning of the sixth lunar month.*"—*By David Dickson, M. D. C. R. M. E. S. Edinburgh* 1712.

"*St. Jerome* in his 132d Epistle directed to *Bitalis*, makes mention of a boy, of ten years of age, impregnating his nurse, and for the verity of the fact, he takes GOD to witness, he did not lie." That is to say, he did not lie in reporting what he had heard.

"Albertus Magnus tells, that *he knew* a girl with child in the ninth year of her age, who was delivered of the same in the tenth."

"*Joseph Scaliger* writes in his Chronological Epistle to *Gomarus*, of a girl of ten years of age, who bore a son to her cousin-german who was not full twelve; a matter of fact known to all the inhabitants of Gascony."

"*Jacobus a Partibus*, in his Commentaries upon Avicenna, Tract. i. Cap. 12, asserts that *he saw* a girl of Tournay, of nine years of age, who was a mother: so that it is possible she might have conceived when she was only eight."

Several other equally extraordinary stories of this kind are collected together by Dr. Dickson, but I think these are sufficient; I shall only add one more, viz. that "*Busbequius* in his description of *Colchis*, an Asiatic country, now called *Mengrelia*, tells us, that the girls there are for the most part mothers in the tenth year of their age; but if this seems not only wonderful but incredible, then they are ready to shew their children, who scarcely exceed the bigness of a frog, to any who desire a sight of them."

Had Dr. Dickson confined himself to the former instances, he would at least have passed for a grave author and diligent compiler, but there is something so ludicrous in the idea of a number of children being shewn altogether, (he must mean alive) not bigger than frogs, as cannot fail to excite laughter.

Oct. 15, 1810. M.

The Case of a Man, who died in consequence of the Bite of a Rattle-Snake; with an Account of the Effects produced by the Poison.—By EVERHARD HOME, Esq. F. R. S.—*with preliminary Observations.*

THE public sensation which was occasioned by a man having been bitten by a *rattle-snake*, kept at a menagerie in Piccadilly, was extended as far as a knowledge of the fact had spread. Curiosity, with respect to the symptoms and fate of the wounded man, was highly excited; but many months elapsed before this curiosity was satisfied. A minute detail of the case has now been published, and we embrace this opportunity of laying it before our readers.

The *genus* to which the serpent that wounded the subject of the following case, belongs, is peculiar to America, and has the expressive appellation CROTALUS, given to it by Linnæus. It contains five species, according to the *Systema Naturæ.*—LINN.

1 CROTALUS *miliarius*.
2 ———— *horridus*.
3 ———— *dryinas*.
4 ———— *durissus*.
5 ———— *mutus*.

To which the *Count la Capede* has added a sixth, the Fisher, *(le Piscivoire)* described by Catesby, *(Nat. Hist. of Carolina,)* and by him only, and two varieties. Gronian durissus. *(Crotalophorus tertius.—Gron. Mus.* 11. 70. *n.* 45.*)* and the fasciated durissus. *(Crotalus faciatus. Vosmaer. monagr. Anno* 1767.*)* The whole of the species of this *genus* are furnished with poisonous fangs, but have the character of seldom biting,* unless irritated, or for the purpose of securing their prey.

The species by which this person was bitten, is the *Crotalus horridus*, the most terrific and formidable of the genus.—Many names have been given to it, either expressive of its mechanism, or its qualities; it is the *Caudisona terrifica* of Laurentius; the *Vipera caudisona*, and *Anguis crotalophorus* of our countryman Ray; the *Regina serpentum* of Hernandez; the *Boiquira* of Piso, and the Encyclop. Method :---From the quickness of its motions, the Mexicans call it *Ecacoatle*,† for it

* The pacific disposition of the rattle-snake is asserted by Batram.

† This word, expressive of velocity, is sometimes written *Hoatcoatl*. Savage nations often employ a highly figurative language. The Mexicans denominate the rattle-snake *Teutlacacauqui*, i. e. the king of snakes.

darts on its prey, wounds, and retires, with the swiftness of the wind.

The *Crotalus horridus* is found along the American continent, from the Streights of Magellhan, to Lake Champlain, in Canada. For a long time after the discovery of the New World, this *Regina serpentum*, reigned without controul over its vast wilds and impassable forests. Few, possibly none, of the native animals preyed upon it; and it was secured from the destroying hand of man, by superstitious terrors, that influenced, unaccountably indeed, the ancient Americans. As human dominion extends, the lower orders of nature submit, or are exterminated. Thus the arts and labour of civilized life, as they clear and cultivate the soil of America, daily diminish the numbers of the *Crotalus*; and contract the space in which its ravages are exercised. It is probable the time is not far distant when it may become a rare animal even in America.*

The habits and powers of the rattle-snake, (*Crotalus horridus*, for it is this species of the genus, upon which observation has been most exercised) have been examined with anxious precision; and much has been written to elucidate them; but on some of its striking properties doubt still remains. There are four particulars, which have most employed attention :---its poison---its power of fascination---its rattle---and its abominable fœtor.

The general terror excited by the rattle-snake, is described with wonderful force and picturesque effect, by the elegant Buffon. "A traveller," says he, "wandering in the burning desarts of Africa, who hears the roaring of a famished tyger furious for prey, and who has no means either of escape or defence, feels not greater dread than when passing through the vast forests of the warm and humid regions of the New World, he scents the abominable fœtor of the *Boiquira*, hears the terrifying noise of its portentous rattle, and observes it ready to spring upon him, from amid the verdant foliage and brilliant flowers of these delightful solitudes." Again, he says, "During storms of thunder it is most to be dreaded. One even shudders in idea, at the terrible situation and mortal agony of a person who, escaping in the midst of almost total darkness from the terrors of a tornado, seeks shelter under the ledge of a rock, and perceives the glaring eyes of a *Boiquira* through the gloom, sometimes illuminated by the lightning, while he hears the rattle of its tail, and the horrid hissings of its venomous mouth. Language has not power to express the deadly swiftness with which the poison of the

* It is a remarkable circumstance, that the European Hog should be the most formidable instrument for the destruction of this serpent. The moment a hog scents a rattle-snake, he erects his bristles, rushes upon it with avidity, and seizes it with extraordinary address.

Boiquira

Boiquira sometimes acts. In a minute, half a minute, in an instant, the bitten animal has expired.* In this country, a rattle-snake bit dogs that died in a few minutes. These experiments were made at the College of Physicians, about 1728. Mr. Ranby, the Surgeon, examined the poisonous apparatus, and gave a description of it in the Phil. Trans. Vol. 35. p. 377. Dr. Edward Tyson had, some years before this, made a minute dissection of another that had been sent to this country, about 1690; and which, probably, was the first brought hither alive. (Phil. Trans. 13. 25.) Of the chemical qualities of the venom not much is known. It is described, however, as a greenish fluid, and that it tinges linen of a green colour, which becomes brighter by washing. It is believed that the poison sometimes accumulates in its receptacle, to a degree that becomes painful to the animal; and that then it attacks every thing that comes in its way.---*(Hist. Gen. de Voyage)*.

Of the facinating power of the *Crotalus horridus*, much has been related, but accompanied with circumstances so extravagant, as to gain but little credence with the reflecting part of mankind. An ingenious and learned naturalist of America (Dr. Barton) has written a treatise expressly on the subject; in which he adduces many observations to prove the non-existence of this power.— The fascinating property has been supposed by some to be connected with the stupifying quality in the breath of the *Boiquira*; by others, to be effected by the dazzling splendour of its eye. *Kalm* offers a solution of some of the instances. He conjectures that "in most of those instances, where a squirrel or a bird has been seen to come apparently of its own accord from the top of a tree into the mouth of the *rattle-snake*, that it had been previously bitten by the serpent; and having escaped into the tree, where it expressed, by its cries and agitation, the violent action of the venom; that as its strength diminished, it gradually descended from branch to branch, till at length it became exhausted, and fell to the ground near the serpent, which remained steadfastly following all its motions with its eyes, and ready to seize it whenever it came within reach."

The mechanism of the rattle has been minutely described; and its structure is doubtless a subject worthy of investigation; but why the animal should have an appendage that must necessarily give notice of its hostile intention, is a question not easily solved. It has been understood, that this serpent could not move without its rattle giving notice of its being in action. This did not, however, appear to be precisely the fact in the two rattle-snakes at Frazer's nursery, Chelsea, in the summer of 1809,

* In the case related by Mr. Home, it may be observed, though the patient lived some weeks, the sensorium was immediately effected.

and

and by one of which, the man whose case is here related was bitten. From observing the habits of those, we can say that when irritated, they formed themselves into several coils, the head erect in the centre, and the tail, with the rattle at the circumference. In this position the rattle was moved with a quick and tremulous motion, to be heard at thirty yards distance.--- This motion of the rattle, which is effected with extreme velocity, appears to mark the design to strike when the object comes within the proper distance; and certainly manifests the snake then to be in a hostile position. If in the common movements this apparatus gives any audible sound, it will have a different character from that which indicates anger. The stroke of the snake, and the cessation of the action of the rattle, occurred at the same instant.

The fœtid odour that is emitted from this serpent, if it sometimes deprives small animals of the power to escape: at others serves as a warning of its approach; and horses, cattle, and other animals thus escape from its bite. This disgusting scent has been described as a property in the breath, and exhaled from the lungs; it is probable, however, that it is afforded by some glands described by Tyson, and placed near the anus: or is compounded of the fœtor arising from the fluid secreted by these glands, and the kalitus thrown out by the lungs and general surface.

Many remedies for the bite of the rattle-snake have been recommended, particularly the *Polygala Senega*; and several instances are recorded of their success. In the case before us, those employed were given on general indications, rather than with a view to specific properties.

When we request the attention of our readers and correspondents to a subject of such interest and importance as the *animal poisons*, and especially those of the order *Serpentes*; we expect that the natural history and deleterious effects of those poisons, will be elucidated in a proportion agreeing with the investigation we hope to elicit.

The Case of a Man who was bitten by a rattle-snake, &c. &c.
(Phil. Trans. for 1810.—*Part* 1.*)*

Thomas Soper, 26 years of age, of a spare habit, on the 17th of Oct. 1809, went into the room in which two healtthy rattle-snakes, brought from America, in the preceding summer, were exhibited. He teized one of them, with the end of a foot rule, but could not induce the snake to bite it, and on the rule dropping out of his hand, he opened the door of the cage to take it out; the snake immediately darted at the hand, and bit it twice in succession, making two wounds on the back part of the first

first phalanx of the thumb, and two on the side of the second joint of the fore finger. The snake is between four and five feet long, and when much irritated bites the object twice, which I believe snakes do not usually do.

The bite took place at half past two o'clock. He went immediately to Mr. Hanbury, a chemist in the neighbourhood.—There was at that time no swelling on the hand, and the man was so incoherent in his language and behaviour, that Mr. Hanbury considered him to be, in a state of intoxication, and gave him a dose of jalap to take off the effects of the liquor, and made some slight application to the bites. It appeared, on enquiry, that the man had been drinking, but that before he was bitten, there was nothing unusual in his behaviour. After leaving Mr. Hanbury the hand began to swell, which alarmed him, and he went to St. George's Hospital. He arrived there at three o'clock. The wristband of his shirt had been unloosed, and the swelling had extended half way up the fore-arm before his admission. The skin on the back of his hand was very tense, and the part very painful. At four o'clock the swelling extended to the elbow, and at half past four it had reached half way up the arm, and the pain had extended to the axilla. At this time, Mr. Brodie, who visited him in my absence, first saw him; he found the skin cold; the man's answers were incoherent: his pulse beat 100 strokes in a minute, and he complained of sickness. Forty drops of aqua ammoniæ puræ, and thirty drops of spiritus ætheris vitriolici in an ounce of mistura camphorata, were given to him, but did not remain on his stomach. The wounds were bathed with the aqua ammoniæ puræ, and the arm and fore-arm had compresses wetted with camphorated spirits applied to them. At five o'clock he took two drams of spiritus ammoniæ compositus, and thirty drops of æther in an ounce and a half of mistura camphorata, which remained on his stomach. At six o'clock his pulse was stronger; at half past seven his pulse was very feeble, and thirty drops of æther, and the same quantity of aqua ammoniæ puræ were given in water. At half past eight it was repeated. At nine o'clock he had the feeling of great depression, his skin was cold, his pulse weak, beating 80 strokes in a minute. The dose was increased to fifty drops of both medicines, and repeated. At a quarter past ten o'clock the pain had become very violent in the arm; his pulse was stronger, but fits of faintness attack him every fifteen minutes, in which the pulse was not perceptible, but in the interval his spirits were less depressed. In the course of the evening he had two stools. At half past eleven o'clock I first saw him. The hand, wrist, fore-arm, and arm, were much swelled up to the top of the shoulder, and into the axilla. The arm was quite cold, and no pulse could be felt in any part, not even in the axilla, the swelling preventing me from feeling the axillary

axillary artery with any degree of accuracy. The wounds made on the thumb were just perceptible; those on the finger were very distinct. His skin generally was unusually cold. I took some pains to diminish his alarm of danger, and found his mind perfectly collected: he said he hoped he should recover. At one o'clock in the morning of the 18th, he talked indistinctly: his pulse beat 100 in a minute; the attacks of faintness came on occasionally. The medicine was repeated every hour. At eight o'clock in the morning of the 18th, his pulse beat 132 strokes in a minute, and was very feeble. The swelling had not extended beyond the shoulder to the neck, but there was fullness down the side, and blood was extravasated under the skin as low as the loins, giving the back on the right side a mottled appearance. The whole arm and hand was cold, but painful when pressed; the skin was very tense; on the inside of the arm below the axilla, and near the elbow, vesications had formed; and under each of the vesications there was a red spot in the cutis, of the size of a crown piece. The skin generally over the body had become warm. He was low and depressed; there was a tremulous motion of his lips, and the faintings recurred at nearly the same intervals as in the preceding evening. The last dose of medicine was rejected by vomitting, but some warm wine remained on his stomach. The arm was fomented. At twelve o'clock, in addition to the above symptoms, there was a starting of his limbs. He had attempted to take some broth, but his stomach did not retain it. The skin of the whole arm had a livid appearance, similar to what is met with in a dead body, when putrefaction has begun to take place, unlike any thing which I had ever seen in so large a portion of the living body. An obscure fluctuation was felt under the skin of the outside of the wrist, and fore-arm, which induced me to make a puncture with a lancet, but only a small portion of a serous fluid was discharged. My colleague, Dr. Nevinson, was present at this visit, and we agreed to continue the internal use of the volatile alkali, with the view of rousing the stomach to action, not considering it as having any specific power over the poison. At eleven o'clock in the evening, finding that his stomach did not always retain the medicines, nor even small quantities of brandy, which were given him, I directed the volatile alkali to be left off, and two grains of opium to be given, and repeated every four hours. At this time his pulse was scarcely perceptible at the wrist, the fainting fits were not less frequent. The vesications and red spots were increased in size.

October 19. At nine o'clock in the morning his pulse was scarcely perceptible: his extremities were cold; the vesications were larger, and size of the arm was diminished. He was drowsy, probably from the effect of the opium. He had taken nothing but brandy during the night. At three o'clock in the afternoon he

he was more depressed: spoke only in whispers: the vesications were increased: the fainting fits less frequent. The arm was diminished in size, and he had sensation in it down to the fingers. At eleven o'clock at night his pulse beat 130 in a minute, and was low. The opium was left off. A stool was procured by clyster. He was ordered to have a glass of camphorated mixture occasionally, and wine and brandy, as often as he could be induced to take them.

October 20. He had dozed at intervals during the night; his spirits were better, and his extremities warmer. At nine o'clock he took coffee for breakfast. He afterwards took some fish for dinner, but it did not remain on his stomach; he therefore took brandy and coffee at intervals, half an ounce at a time, as larger quantities did not remain on his stomach.

October 21. He had slept at intervals during the night, but was occasionally delirious: his pulse 120 in a minute. Brandy and jelly were the only things that stayed on his stomach. The size of the arm was reduced, but the skin was extremely tender.

October 22. He had slept during the greater part of the night, his pulse beat 98 in a minute; he took some veal for dinner, and brandy at intervals. In the evening his pulse became full and strong: he was ordered wine instead of brandy. The right side of the back down to the loins was inflamed and painful; and had a very mottled appearance, from the extravasated blood under the skin.

October 23. His pulse continued full, and the arm was very painful, though reduced in size. The vesications had burst, and the exposed cutis was dressed with white ointment. Stools were procured by an opening medicine. He took some veal and porter for dinner; the wine was left off. In the evening he had a saline draught with antimonial wine.

October 24. There was no material change.

October 25. His pulse had increased in frequency, but in other respects he was nearly the same. His bowels were opened by medicine.

October 26. The arm was more swelled and inflamed.

October 27. The inflamation of the arm had increased: his tongue was furred, and his pulse was very frequent. He attempted to sit up, but the weight of the arm and the pain prevented him. The arm was bathed with spirits of wine and aqua ammoniæ acetatæ in equal quantities.

October 28. A slough had begun to separate from the inside of the arm below the axilla, and a purging had come on, for which he was ordered chalk mixture and laudanum. In the night he had a rigor.

October 29. The purging had abated: his pulse beat 100 in a minute, and was feeble. A large abscess had formed on the outside

outside of the elbow, which was opened, and half a pint of reddish-brown matter was discharged with sloughs of cellular membrane floating in it. The lower part of the arm became much smaller, but the upper part continued tense. A poultice was applied to the wound. The lower portion of the arm and the fore-arm were covered with circular stripes of soap cerate. He was ordered to take the bark, and allowed wine and porter.

October 30. The redness and swelling of the upper part of the arm had subsided: the pulse was 100 in a minute. The purging had returned. The bark was left off: the chalk mixture and laudanum were given, and an opiate clyster administered.

October 31. The pulse beat 120 in a minute. The discharge from the abscess had diminished, the purging continued, and at night he had a rigor.

November 1. The pulse was 120. His voice was feeble; he had no appetite, was delirious at intervals. Ulceration had taken place on the opening of the abscess, so that it was much increased in size. He drank two pints of porter in the course of the day.

November 2. His pulse was very weak; his countenance was depressed; his tongue brown; the ulceration had spread to the extent of two or three inches. Mortification had taken place in the skin nearer the axilla. His stomach rejected every thing but porter; in the night he was delirious.

November 3. The mortification had spread considerably: the purging continued: the fore-finger which had mortified, was removed at the second joint.

November 4. He died at half-past four o'clock in the afternoon.

Sixteen hours after death, the body was examined by Mr. Brodie and myself, in the presence of Mr. Maynard, the house surgeon, and several of the pupils of the hospital.

With the exception of the right arm which had been bitten, the body had the natural appearance. The skin was clear and white, and the muscles contracted.

The wounds made by the fangs at the base of the thumb were healed, but the puncture made by the lancet at the back of the wrist was still open. That part of the back of the hand, which immediately surrounded the wounds made by the fangs, for the extent of one inch and a half in every direction, as also the whole of the palm, was in a natural state, except that there was a small quantity of extravasated blood in the cellular membrane. The orifice of the abscess was enlarged, so as to form a sore on the outside of the arm, elbow, and fore-arm, near six inches in length. Around this, the skin was in a state of mortification, more than half way up the outside of the arm, and as far downwards,

wards, on the outside of the fore-arm. The skin still adhered to the biceps flexor muscle in the arm, and flexor muscles in the fore-arm, by a dark coloured cellular membrane. Every where else in the arm and fore-arm, from the axilla downwards, the skin was separated from the muscles, and between these parts there was a dark coloured fluid, with an offensive smell, and sloughs of cellular membrane resembling wet tow, floating in it. The muscles had their natural appearance every where, except on the surface, which was next the abscess. Beyond the limits of the abscess, blood was extravasated in the cellular membrane, and this appearance was observable on the right side of the back as far as the loins, and on the right side of the chest over the serratus major arnicus muscle.

In the thorax the lungs had their natural appearance. The exterior part of the loose fold of the pericardium where it is exposed, on elevating the sternum, was dry, resembling a dried bladder. The cavity of the pericardium contained half an ounce of serous fluid, which had a frothy appearance from an admixture of bubbles of air. On cutting into the aorta, a small quantity of blood escaped, which had a similar appearance. The cavities of the heart contained coagulated blood.

In the abdomen, the cardiac portion of the stomach was moderately distended with fluid: the pyloric portion was much contracted; the internal membrane had its vessels very turgid with blood. The intestines and liver had a healthy appearance. The gall-bladder was moderately full of healthy bile. The lacteals and thoracic duct were empty; they had a natural appearance.

In the cranium, the vessels of the pia mater and brain were turgid with blood; the ventricles contained rather more water than is usual, and water was effused into the cells, connecting the pia mater and tunica arachnoides. It is to be observed, that these appearances in the brain and its membrane are very frequently found in cases of acute diseases which terminate fatally.

The following cases were sent from India, to my late friend, Dr. Patrick Russell; they arrived after his death, and Mr. Claude Russell very kindly gave them to me, knowing the subject of them to be one, in which I had taken an interest. As they correspond in many of the circumstances, with that which has been detailed, I have inserted them in this place, as well as an experiment, which I had an opportunity of making in the West Indies, on the effects of the snake's poison on animals.

A boy, a slave of a gentleman in India, was bitten by a snake called Kamnlee by the natives, in the lower part of the arm, at eight o'clock in the evening. The blood flowed very freely for some time. He died next day at noon in great pain.

A sepoy, sixty years of age, was admitted into the hospital of his regiment, under the care of Mr. Perrin, assistant surgeon, at four

four o'clock in the afternoon of the 15th of October, 1802, in consequence of his being bitten by a Cobra di capello, on the back part of the hand. At the time of his admission he complained of pain running up the arm. He immediately took a drachm of eau de luce, and this dose was repeated every half hour, and the same remedy was applied externally as a lotion to the arm and fore-arm. At four o'clock in the morning of the 16th of October, the pain began to increase, and the arm to swell with great hardness and stiffness, and tumor in the axilla, with much inclination to vomit. He took twelve grains of Dr. James's powder, which brought up a great quantity of bilious matter. He drank copiously of warm water, but no perspiration was induced. He appeared relieved for a short time. At eight o'clock in the morning the arm was distended, painful, and discoloured. He took four ounces of brandy, and repeated it every hour until twelve o'clock, with a drachm of eau de luce occasionally. At this time he was a little revived. The brandy was reduced to two ounces, which were carefully and regularly given every hour, until twelve at noon on the 17th of October, when the arm was more free from pain, but much swelled, hard, and black: his spirits and pulse also were considerably relieved. The eau de luce was now omitted, but the brandy was continued every hour, until twelve o'clock at noon on the 18th of October, when the stiffness and tumor in the axilla had disappeared, the arm was still swelled, but was softer, and less painful. The brandy was omitted; at night he took six grains of Dr. James's powder. On the 19th of October the arm was less, softer, with little or no pain; a blister was formed and burst on the back of the hand, which discharged three ounces of black fœtid pus. On the 20th, an abscess burst on the hand, in the same situation as the blister, which discharged a large quantity of fluid, having an offensive smell. He was directed to take a drachm of Peruvian bark in port-wine, every two hours. On the 22d the swelling was gone, but the discharge was considerable. From this time the man gradually, but slowly recovered, with the loss of the use of his fore-finger, which remained permanently extended, and some of the other fingers were affected in a less degree.

In this case, the swelling of the arm was slower in coming on, and less extensive; the pain running up to the axilla, which preceded it, was mistaken for the effect of absorption.

In the year 1782, while in the island of St. Lucia, I made the following experiment.

A spotted dark-coloured snake, about two feet in length, having the poison fangs on each side double, with the corresponding surfaces grooved, so as to form a canal for the poison, was put into a square tin box, open at the top, in which a half-grown rat was confined. The rat expressed great terror, and remained

crouching

crouching in one corner of the box, with its eyes fixed on the snake, who lay coiled up at some distance; they were allowed to remain a few minutes in this situation. I then raised one end of the box, which caused the snake to slide along the smooth surface, till it came in contact with the rat, which it immediately bit. The rat died in a minute after the bite. I removed it immediately from the box by means of a long pair of forceps. The wounds made by the fangs were marked by two specks of blood immediately below the shoulder blade. On dividing the skin with a scalpel, the cellular membrane under it was found entirely destroyed: the muscles were detached from the ribs, and from a small portion of the scapula. The parts immediately surrounding the bite were exceedingly inflamed; as far as I could trust to memory, the appearances very much resembled those produced on the muscles of a dog's thigh, by the application of white arsenic, in consequence of which, death ensued in about sixteen hours.

Fifteen hours after the death of the first, a second rat was bitten by the same snake. This rat was much irritated, and bit the snake in the neck, so violently, that the latter died in about ten minutes. The rat continued very lively for about six hours, and then died. On examination after death, the bite was found to have been inflicted on the left side of the navel, and the abdominal muscles at that part were in the same state as in the other rat, but in a less degree.

It appears from the facts, which have been stated, that the effects of the bite of a snake vary according to the intensity of the poison.

When the poison is very active, the local irritation is so sudden and so violent, and its effects on the general system are so great, that death soon takes place. When the body is afterwards inspected, the only alteration of structure met with, is in the parts close to the bite, where the cellular membrane is completely destroyed, and the neighbouring muscles very considerably inflamed.

When the poison is less intense, the shock to the general system does not prove fatal. It brings on a slight degree of delirium, and the pain in the part bitten is very severe: in about half an hour swelling takes place from the effusion of serum in the cellular membrane, which continues to increase with greater or less rapidity for about twelve hours, extending during that period into the neighbourhood of the bite; the blood ceases to flow in the smaller vessels of the swoln parts; the skin over them becomes quite cold, the action of the heart is so weak, that the pulse is scarcely perceptible, and the stomach is so irritable, that nothing is retained on it. In about 60 hours these symptoms go off, inflammation and suppuration

tion take place in the injured parts, and when the abscess formed is very great, it proves fatal. When the bite has been in the finger, that part has immediately mortified. When death has taken place under such circumstances, the absorbent vessels and their glands have undergone no change similar to the effect of morbid poisons, nor has any part lost its natural appearance, except those immediately connected with the abscess.

In those patients who recover with difficulty from the bite, the symptoms produced by it go off more readily, and more completely, than those produced by a morbid poison, which has been received into the system.

The violent effects which the poison produces on the part bitten, and on the general system, and the shortness of their duration, where they do not terminate fatally, has frequently induced the belief, that the recovery depended on the medicines employed: and in the East Indies, eau de luce is considered as a specific for the cure of the bite of the cobra di capello.

There does not appear to be any foundation for such an opinion; for when the poison is so intense, as to give a sufficient shock to the constitution, death immediately takes place, and where the poison produces a local injury of sufficient extent, the patient also dies, while all slighter cases recover.

The effect of the poison on the constitution is so immediate, and the irritability of the stomach is so great, that there is no opportunity of exhibiting medicines till it has fairly taken place, and then there is little chance of beneficial effects being produced.

The only rational local treatment to prevent the secondary mischief, is making ligatures above the tumefied part, to compress the cellular membrane, and set bounds to the swelling, which only spreads in the loose parts under the skin; and scarrifying freely the parts already swoln, that the effused serum may escape, and the matter be discharged, as soon as it is formed.—Ligatures are employed in America, but with a different view, namely, to prevent the poison being absorbed into the system.

To

To the Editors of the Medical and Physical Journal.

Mr. Hume's *Cursory Remarks on Arsenical Preparations.*

Gentlemen,

THE internal application of arsenic to the human frame is of such moment in therapeutics, this drug having nothing in its character between the two extremes of doing a great deal of good, or much mischief, that any error respecting the preparations of an agent so formidable cannot be too soon or too generally exposed, particularly if such error be sanctioned by names of professional, and, in all other respects, most meritorious authors.

There are not more than two formulæ admitted into general practice in the British empire, viz. Fowler's solution, and Macquer's arsenical salt; the first of these may be considered as the *arsenite*,* and the other salt as the *arseniate* of potash, this alkali being the basis in both cases. In regard to another preparation, the simple solution of the white oxide in distilled water, first prescribed by M. Le Febure, it is, I believe, seldom employed in this country; but, considered as an officinal article, there is one objection against it, that it cannot be preserved long, being disposed to turn fetid, and of course to become impaired in its efficacy.

By Dr. Fowler's prescription, his solution ought to contain four grains of the oxide in each fluid ounce of the solution, or, which is equivalent, sixty-four grains in the English pint. The compound spirit of lavender may be useful to prevent mistakes, lest this mixture should pass for plain water, but as cheaper substances might be contrived, I apprehend the author's aim was to preserve this remedy from spoiling. This medicine is precisely the same form admitted by the London College into their pharmacopœia, but why it has been preferred to the arseniate I am not yet informed; it may be superior in its powers, or it may be equal to the arseniate of the Dublin College.

The mistake to which I now particularly allude is, that of confounding the two terms, *pound* and *pint;* for, unfortunately, the word *libra* has long been employed indiscriminate-

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* As *i* is a radical letter in the primitive word, perhaps this should be written *arseniite*; I am not, however, disposed to contend this point, especially as the modern nomenclature is not only fleeting, but even degraded, through some of Mr. Davy's splendid discoveries.

ly for both, and probably we may trace the blunder to this source. This fault may be excusable in the Latin language, where there is less choice, but as it really prevails among some English authors, I trust this observation will have its weight and be considered equally as interesting to patients as it is to physicians. Now this error, the unqualified use of the words pint and pound, in one example at least, appears in the same pages of the same volume; therefore, should Fowler's solution be prepared from such an authority, is there not a chance of twelve ounces troy *weight* being substituted for the pint, or, what is now deservedly preferred, the octarius of the College here?—The technical excellence of the work itself and the high character of the author, to whom I more closely refer, leave no room to doubt that this ambiguity will be removed in a future edition.

In regard to the discordance which exists in our metropolitan pharmacopœias, there is, notwithstanding some late improvements, still great room for complaint. This important subject was, I have reason to believe, first taken up by myself, by those general observations which are inserted in the 11th and 12th vol. of your Journal, and which must be considered as a mere attempt to encourage others to pursue the same route, who have more leisure and perhaps more knowledge upon this important matter. I cannot subscribe to the necessity of invoking the royal authority to sanction three pharmacopœias for the united kingdom, while these volumes, speaking of them collectively, teem with dissimilarity in names, compounds, materia medica, and indeed in all other particulars. Surely the constitutions of the English, Irish, and Scots do not require each a distinct set of medicines or a peculiar mode of treatment in any disease whatever; why, therefore, such discongruity in these prescriptions?

This reminds me of my original subject, the arsenical preparations. No reason, I conceive, has yet been assigned why the Dublin College adopts the arseniate of potash, while the London College prefers Fowler's arsenite. If these medicines possess the same powers in all respects, it is unnecessary for the dispensatories still to continue thus diverging; I should think some scheme might be formed to ascertain the respective merits of these two articles at least. Should they prove to be of equal value, I would not hesitate to adopt the arseniate, or Macquer's neutral salt, for there is not a more neat and perfect chemical compound; it is portable, durable, and in every respect most suitable for officinal preference.

The process of the Dublin College for this salt might in some measure be improved, but here I speak with great deference; the heat I consider as too great, for, if the bottom of the glass vessel be even obscurely red, some part of the

arseniate will be decompounded; I would, therefore, rather say, "igne sensim aucto donec cessaverint vapores, &c."

We know, and it is generally admitted, that a wide difference exists between some mercurial compounds, between calomel and corrosive sublimate as an example; that these produce distinct effects on the human frame, and that practitioners to this day are not quite agreed as to their precise value. I mention this circumstance as it serves to illustrate the following comparison, in which, as far as chemical tests can decide, there is the same opposition in the two preparations of arsenic.

Thus, lime water changes calomel into a *black* oxide or precipitate, and corrosive sublimate into a bright *yellow* oxide of mercury, colors certainly perfectly opposite to each other; and in respect to the arsenical compounds, I have, in my late communications to you, fully described the effect of nitrate of silver, which converts the metal of the arsenite into a bright *yellow* precipitate, being arsenite of silver; while the same reagent turns the arseniate into a deep brick-coloured *red*. Whether these habitudes of the arsenical salts prognosticate an important variety in them, as medicines, is a question yet to be determined.

It is chiefly in public hospitals, both naval and military, as well as in charitable institutions, that true results can be obtained to guide such a decision, and the relative merits of these and many other remedies fairly appreciated; to the managers of these numerous and proud marks of British charity, let us therefore with confidence assign the investigation of this and all similar doubts.

I beg now to testify my obligations to your correspondent, Mr. Jones, for his ready attention to my request, and to say that, having no reason to doubt the accuracy of his conducting the experiments which I suggested, I fully acquiesce in the deductions he has drawn respecting the case of poison by arsenic.

As, in the process of heating the suspected arsenic with nitrate of potash, I rather insist more upon the *effect* than the *color* of the nitrous vapors or acid that might arise, let me enforce the necessity of watching the *change* produced on the litmus-paper; for if the blue become reddish, one proof at least of the presence of the poison is substantiated. In case litmus paper be not at hand we may substitute many other vegetables, such as a strong infusion of red-rose flowers, mallow-flowers, red-cabbage, &c.; by dipping a piece of any clean white paper that does not readily bear ink into one or other of the above infusions.

I remain, Gentlemen, Your obedient servant,

Long Acre, Oct. 13, 1810. JOSEPH HUME.

CRITICAL ANALYSIS

OF

RECENT PUBLICATIONS

IN THE

DIFFERENT BRANCHES OF PHYSIC, SURGERY, AND MEDICAL PHILOSOPHY.

A Dissertation on Retroversion of the Womb, including some Observations on Extra-Uterine Gestation. By SAMUEL MERRIMAN, M. D. 8vo. Lond. 1810. pp. viii—80. Callow,

THE substance of this dissertation originally appeared in the volumes of this Journal. In its present dilated and improved form, it is intended to establish two points of importance in the theory of Pregnancy, and the practice of Obstetrics.

Retroversion of the uterus, as a fact occurring at one period of uterine gestation, is well known: the extension of this displaced position of the womb to the last term of pregnancy, is not, however, so fully ascertained; neither has it hitherto been subjected to much investigation. Dr. Merriman adduces several cases to prove the existence of this state of the uterus in the latter months of gestation, and that it also gives rise to another fact in the history of pregnancy, commonly denominated *extra-uterine gestation*; but which has, from its discordance with established physiological principles, remained doubtful, obscure, or "incomprehensible."

That retroversion of the uterus must have occurred at all periods, cannot be doubted; but that its real phenomena have only lately been understood, occasions more regret than surprize. Neither Mauriceau, Lamotte, nor Deventer, who attended particularly to a state of the womb, which we denominated its obliquity,* had any precise knowledge of this altered position of the uterus, nor of the effect it produced on the bladder and rectum; deranging the functions, and obstructing the operations of these organs. "The first person who entertained any "correct idea of this accident, was M. Gregoire, an accoucheur of con-"siderable reputation at Paris, about the middle of the last century, and "a lecturer on the practice of midwifery. M. Gregoire's lectures were "attended by many students, who afterward became celebrated accou-"cheurs; and among others our countryman *Smellie*: yet his doctrine "upon this subject seems to have been recollected by only two of his "pupils,—the French accoucheur M. *Levret*, and Mr. *Wall*; and from "the latter the accoucheurs of England first gained information on this "subject."

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* *Rien ne lui fit plus d'honneur,* says his biographer, *que d'avoir prouve que l'obliquité de la matrice est une des primicres causes des accouchemens difficiles, & d'avoir indiqué la manœuvre que demandent les accauchemens de cette espece.*

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"The lectures which Gregoire delivered were never printed, and "therefore it is impossible to know exactly what opinion he had formed "of this accident; but that he was aware of the *fundus uteri* being "thrown down between the vagina and rectum, is evident from the di-"rections which he gave for replacing it.* In the year 1754, Mr. Wall, "who had settled in London, was called to attend a woman labouring "under a suppression of urine, from a retroversion of the uterus, and "being convinced that it was a case of the kind described by Gregoire, "he endeavoured to relieve his patient by the method taught by that "lecturer; but failing in his object, he called in the assistance of the "late Dr. William Hunter. Their united endeavours in various ways "were unavailing, and the woman died! Dr. Hunter, with the most "laudable desire to disseminate knowledge, having obtained leave to "open the body, invited a number of gentlemen of the faculty of me-"dicine to a public lecture, which he read for the purpose of making "the disease generally known. Drawings were taken of the parts, "from the dissection of this woman, and an engraving from these was "inserted in Dr. Hunter's splendid *Anatomy of the Human Gravid* "*Uterus*." This case, however, did not come fully before the public, until in 1771 it was printed in the 4th volume of the Medical Observations and Inquiries (p. 400), as an appendix to a history of retroverted uterus, there related by Mr. Lynn, of Woodbridge in Suffolk. Mr. Lynn's narrative is, we apprehend, the first printed account of this form of retroverted uterus published in England.

From the year 1771 this accident has so often been described, that its symptoms are perfectly understood, and are relieved with great certainty by the simple process of introducing the catheter so frequently as to prevent the bladder being distended with urine.† For many useful ob-

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* M. Gregoire instructed his pupils, that with one finger in the vagina and another in the rectum, an attempt should be made to raise the fundus and to replace the uterus. This was advised to be done while the woman was lying on her back, an unfavourable position for the purpose: for, should this manœuvre ever be deemed necessary, the objects of it may be accomplished with more facility while the patient is resting on her elbows and knees.

† In the cure of retroverted uterus, the principal reliance is to be placed upon the introduction of the catheter; and this should be done twice at least in twenty-four hours. Care is likewise to be taken to keep the bowels open, and rest is to be enjoined. By pursuing this plan steadily, the mal-position of the uterus is usually overcome in a few days. It is still customary with some practitioners of eminence to make use of artificial means for replacing the womb, after the bladder has been emptied and the bowels opened; and there can be no great objection to making such an attempt, provided it be done cautiously, and that no (improper) force be made use of. In general, however, nothing of this kind is either necessary or advisable." p. 24.

In many cases of retroverted uterus which have fallen under our care, the catheter thus employed, enjoining a recumbent posture, and attending to the state of the bowels, has been completely successful. In some of these cases the uterus was alarming impacted in the pelvis; yet the termination was always fortunate. The introduction of the catheter, and the emptying the bladder by that means, being the desideratum in the management of this complaint, the following practical observations by *Dr. Denman* cannot fail to be acceptable. "It cannot be disputed (*Introduction, vol. i.* 140.) but that all attempts to restore the *uterus* to its natural position, before the distention of the bladder is removed, must be

 fruitless,

servations on this form of the disease, we are compelled, though unwillingly, to refer to the Dissertation itself; and can only remark, that retroversion has also recurred in the unimpregnated state of the uterus, when it has been enlarged by disease. Of this an instance is related by Dr. Merriman, and Mr. John Pearson (Observations on Cancerous Complaints, 8vo. Lond. 1723), on examination, in a case of diseased uterus, " found it hard, immoveable, and so much enlarged, that it " filled up the superior part of the vagina: it was also retroverted, the " *os uteri* pressing against the bladder, and the *fundus uteri* compressing " the rectum." p. 114. In these cases, however, it is obvious that the danger, as arising out of the position of the uterus, will neither be so great, or approach with such rapid strides, as in the impregnated state of that organ.

The continuance of the impregnated uterus in a retroverted position to the last period of utero-gestation, is a fact possessing both novelty * and interest; especially as Dr. Merriman deduces conclusions from it, explanatory of what has been deemed *extra-uterine gestation*.

Of this state of the uterus Dr. Merriman relates two instances; one of them is that which occurred to Dr. Jackson, as specified in the note below, and the other is a minutely circumstantial history of a case which happened in 1806. It is hardly to be doubted, however, that this variety of retroverted uterus, differs very essentially from that which occurs in the early period of pregnancy. In the mal-position of the uterus, prior to the rising of that organ above the brim of the pelvis, the danger is hourly increasing by the increasing size of the uterus while impacted in that bony cavity; and by which its pressure, both on the bladder and rectum, is carried to a point that completely obstructs the expulsion of their contents. In the other variety, that which continues to the full term of utero-gestation, the womb being necessarily above the brim of the pelvis, and lying among parts that may recede from its pressure, though much inconvenience will arise, no urgent danger presents till the period of parturition. We mistake Dr. Merriman exceedingly, if he does not lead his readers to understand that this second variety, or that which lasts to the end of utero-gestation, is a continuance of the first variety, or the retroverted uterus of

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fruitless, as the *uterus* will be irresistibly borne down by the pressure of the superincumbent *bladder*. The first step then to be taken for the relief of the patient is, to draw off the urine; yet there is always in these cases great difficulty in the introduction of the common catheter, because the urethra is elongated, altered in its direction, and pressed against the ossa pubis by the tumour formed by the retroverted uterus; and many women when the *uterus* was retroverted, have lost their lives from the want of expertness in introducing the *catheter*. But the attending inconveniences may be avoided or surmounted by the use of a flexible *catheter*, slowly conducted through the *urethra*. I say slowly, because, whatever *catheter* is used, the success of the operation, and the ease and safety of the patient, very much depend on this circumstance. The *catheter*, when introduced, should not be carried farther into the bladder, when the urine begins to flow, unless it ceases before the distention is removed; which in some cases happens in such a manner, as to give us an idea of a bladder divided into two cavities."

* We have much satisfaction in stating, that our friend Dr. H. J. Jackson, of Hanover-street, in a judicious little work, (*Cautions to Women respecting the state of Pregnancy, &c.* 8vo. Lond. 1798,) published the first case of this disease.

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early pregnancy; and that it is one of its terminations.* "It has been," he says, "the almost uniform opinion of writers on the retroversion of "the gravid uterus, that a suppression of urine must necessarily be pro- "duced by this unnatural situation of the womb, and that this suppres- "sion must be removed by art; otherwise, they say, abortion will take "place, or a still more melancholy event, mortification, or rupture of "the bladder, and, consequently, the death of the patient will ensue; "and, in cases where suppression of urine has come on, this has un- "questionably *been the usual progress* and termination of the complaint, "unless proper means of cure have been had recourse to at the com- "mencement of the disease. It is, however, consolatory to know, that, "under some circumstances, *the uterus may remain in a state of retrover- "sion* for a very great length of time, even to the completion of the "period of utero-gestation, without producing a total suppression of "urine, or any other very uncommon or alarming symptoms." (p. 25.) It is probable, however, and it is a fact of some importance both as to the true history of the disease and to the practice, that these are two distinct complaints; one being necessarily confined to the first period of utero-gestation, that is, before the uterus rises above the pelvis; the other, as necessarily occurring in that period when, in its enlarged state, the womb has risen into the cavity of the abdomen: one being accompanied with immediate and urgent danger, the other with injurious consequences remote and uncertain. It does not appear that those who have suffered under that variety of retroverted uterus which continues to the time of parturition, have experienced the symptoms and the hazards of that which appears in early pregnancy. "Mrs. F——— did not "suffer more, during her pregnancy, than most other women, except, "that for the *last two or three months*, she was troubled with difficulty "in parting with her urine, and considerable pain in the act of passing "it; yet her sufferings in this particular were not so great as to induce "her to consult her accoucheur on the subject. She neither at this "time, nor at any earlier period of her pregnancy, experienced a total "suppression of urine, nor does she recollect ever having retained it "long enough to occasion any considerable inconvenience." (p. 28). In Mrs. F———'s case there is a distinct point of time marked for the commencement of her disease. "When about *five months* advanced in "her pregnancy, she was much terrified and affected on hearing of the "sudden death of her aunt; which, as she herself expressed it, *seemed "to turn her whole inside upside down*." Whether the feelings of Mrs. F——— were, or were not, sufficient to determine that then the altered position of the uterus took place, does not seem of much weight; for it is evident, from the history, that it had not been preceded by

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* At page 76, Dr. Merriman puts this past all doubt, for he there positively says, "that the uterus, which has become retroverted in the earlier stages of "pregnancy, *may continue in that state* till the full period of gestation has "elapsed." It is not designed to contend that the two varieties of retroversion may not exist at different periods in the same pregnancy; but if they do exist, that the coincidence is accidental, and that they have no dependence one on the other. In Mrs. F——'s case there is no ground to presume an early retroversion. In the case related by Mr. Kelson there was an early retroversion, but this was completely removed long before the accession of the other disease.

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the unvarying symptoms of the first variety of retroverted uterus. In the case related from *Nicholas Patuna*, the patient, "about six weeks "after conception, was attacked with violent pains in the lower belly, "and was unable to pass her urine, except when lying on her back. "From this time, till she entered the ninth month of her pregnancy, "she suffered much at various times, from pains in the belly, and loins, "and other complaints." These symptoms, though they shew the existence of some morbid change, are certainly no evidence that this change was the first variety of retroverted uterus. Mr. Kelson's case, related in the 11th volume of this Journal, was, in the first instance, unequivocally the retroverted uterus of early pregnancy. It was cured by the usual method (a daily introduction of the catheter); and about the 12th week, the impediment to the flow of urine being removed, *the uterus took pretty much its natural situation.* (p. 52). After this, it appears that the second variety of retroversion took place; but at what period was never determined; nor was it demonstrated that this wrong position of the womb did exist, until after the usual period of gestation had elapsed, when the indications of labour enabled Mr. Kelson to ascertain "that the child was plainly to be felt through the vagina, that "the uterus was not enlarged, but forced upwards and forward, and the "*os tinea quite closed.*"

Under every point in which we have viewed this statement, a conviction has arisen, that the variety of retroverted uterus occurring in the latter months of pregnancy, has no dependance on, or connection with that which appears in the early period; that is, before the fourth month of utero-gestation. With this impression, we regret that the disease which Dr. Merriman has so accurately traced, and from which he has deduced a conclusion greatly interesting to science, should have received ths name of *retroverted uterus.* This we regret because it wants precision—because it confuses it with a disease already well known, and with which, we believe, it has no connection—and because it may, in some instances of the true retroverted uterus, lead to a fatal procrastination.

We intreat Dr. Merriman will consider that these observations are not made with the intent to depreciate his ingenious Dissertation, but in the spirit of scientific investigation, and with the ardent desire to elicit truth.

To whatever degree we may dissent from the opinion, that the deranged position of the womb sometimes met with in the latter months of pregnancy, is a continuation or termination of a case, so fully known under the term RETROVERSION:—or how much soever we may object to the application of the same name to two distinct diseases, we readily admit that the subject has been greatly elucidated by our author; and we believe the following conclusions to be formed on the solid ground of fact and fair reasoning.

Whenever that peculiar state of the uterus which Dr. Merriman denominates retroversion, and which he describes as a continuance of the retroversion of early pregnancy does take place, it may be expected to terminate in one of the following ways.

1st. "The good form of the pelvis, the health and strength of the "mother, and the efficacy and continuance of the pains, may all com- "bine to replace the uterus, and produce a favourable issue.

2dly.

2dly. "The want of some, or all, of these fortunate circumstances, "or injudicious management under the labour, may occasion the woman "to fall a victim to this untoward position of the womb, in the course of "a few days, either by a rupture of the uterus producing speedy death, "or by an active inflammation or mortification of the parts.

3dly. "The uterus being unable to extricate itself out of the aukward "position into which it is thrown, may passively submit to the burthen, "till, by the slow process of ulceration, the fœtus may be excluded "through the rectum or vagina, and the mother remain alive."

In the preceding part of the Dissertation, the observations and facts have been principally employed in elucidating that favourable termination of the disease, which occurs when, from the good form of the pelvis and other circumstances in the patient, the womb is restored to its natural position, and the fœtus is extruded by the proper uterine action. The remaining part enters on a disquisition extremely curious and interesting.

The frequent recurrence in the records of medicine of histories of *extra-uterine gestation* would, it might be presumed, have rendered the fact, great as the violation of a law of nature is, sufficiently distinct and tangible. The investigations to which Dr. Merriman has subjected these histories, has demonstrated, however, that some of them must come under a very different class; while over the remainder is spread a degree of doubt that renders their character equivocal.

"Mr. Kelson, Mr. Colman, and Mr. Mainwaring, have all deno- "minated their communications,* cases of *extra-uterine fœtus*. If by "this is merely meant that the fœtus, after being brought to maturity, "or nearly so, in the uterus, was excluded from thence into the cavity "of the abdomen, either by a rupture of the uterus, or by an ulcerated "opening through its parieties; and afterwards, by the same process, "discharged through the rectum or vagina, I completely accord in the "same opinion; but if, as I understand, it is supposed that these fœ- "tuses were actually nourished, and brought to perfection in the cavity "of the abdomen, unconnected with, and perfectly distinct from, that "system of vessels which have been expressly set apart by nature for "this purpose, I must confess myself not at all convinced by these cases "of the existence of a fact, so completely at variance with all we know "of the laws of nature, and of the animal œconomy. I mean not to "deny," he adds, "that fœtuses have been found in the cavity of the "abdomen, entirely disengaged from the uterus and its appendages; "but I think that in such instances a *rupture* of the womb, of the tube, "or ovarium, or an ulceration through their parieties, had permitted the "escape of a full grown fœtus, and not that the conception had ad- "vanced to maturity in a part apparently so ill adapted to such a pur- "pose. Every one of the instances of *extra-uterine gestation* which I "have had an opportunity of perusing, has been deficient in some of "the particulars, or symptoms, which are necessary for confirming the "fact, of a fœtus being nourished in a cavity, and by vessels intended

* Cases given in Dr. Merriman's Dissertation from the Medical and Physical Journal, (vols. 2 and 11,) and from the 2d volume of the Transactions of a Society for the Improvement of Medical and Chirurgical Knowledge.

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"for other purposes, and distinct from the uterine system; and at the "same time the case was capable of being explained in a more rational "way."

Dr. Merriman examines, with much acumen, several cases which have been considered by their authors as extra-uterine; and shews, with great force of probability, that they have arisen from a rupture or ulceration of the uterus, consequent to that altered position which he has denominated *retroversion*. We are able to add to the catalogue a well-marked history, where the fœtus escaped from the tube, passed by the medium of ulceration into the rectum, and was expelled, *per anum*; and where the uterus had also taken the position which is considered to give rise to such cases. It occurred to Mr. Giffard the surgeon, and was published in 1730, in the Phil. Trans. vol. 36. p. 435.

"I was sent for about the middle of August," says Mr. Giffard, "to a woman who then judged herself to be between three and four "months gone with child: she had all the symptoms preceding a mis-"carriage, and upon touching I found the *os tineæ* somewhat dilated and "spread, and from whence I concluded miscarriage would ensue; but "I was some time after informed, that although she before believed that "she had miscarried, that she now thought herself quick; as feeling "somewhat to move within her, agreeable to what she had perceived "after former quickenings. Thus it passed on for about six or seven "weeks; in which time she grew much bigger, and the motion more "perceptible; so that there remained no doubt of her being with child. "On the third of October she was seized with violent pains in her "belly and back; which daily increasing, I saw her on the sixth, and "found her labouring under very great pains, and other complaints like "those preceding miscarriage or delivery. To be better satisfied, I "passed up two fingers into the vagina, to examine by the touch, whe-"ther the *os tineæ* began to open. *I there felt a large and unusual full-"ness and tension, which I then judged to be the body of the uterus sunk "low in the vagina, and much distending it, and extending backwards, "and pressing against the rectum, so that the excrements could not pass, "neither could she, from its pressure upon the neck of the bladder, freely "make water. I could not find the os tineæ, although I very carefully "examined; wherefore I then judged that the fundus uteri must have re-"ceded from its natural position, and be bent backward toward the rec-"tum: in which opinion I was the more strengthened, from the fulness I "had observed stretching backward; and therefore concluded that the* os "tineæ *must be very forward: wherefore I endeavoured to pass my fin-"gers between the os pubis and the fulness which pressed against the upper "edge of the said bone. This with some difficulty I effected, and at length, "about two or three inches above the said bone, I felt the* os tineæ *with "the ends of my fingers.* The cause of this situation will more clearly "appear in the pursuit of this account. I ordered her anodine and "quieting medicines to relieve her pain, which she was obliged to repeat "every twelve hours; and sometimes clysters. Thus matters continued "to the 20th of the said month, only that for some days before, a wa-"ter tinged with blood came away, as she imagined, through the *anus*.

"On the 20th her husband came to me, with an account that the "midwife had brought away a fœtus, but could not compleat her busi-"ness.

"ness. The midwife informed me that a fœtus was protruded through "the anus; and to confirm it, desired me to examine, which I did, and "found the *funis umbilicalis* hanging out about three inches beyond the "anus, and passing up through the same. I passed my fingers by the "string into the anus; where I found, about three inches up, an open-"ing, as I then judged, into the uterus, wide enough to admit the ends "of three or four fingers, and the *funis* passing into it; from whence "I was assured that the fœtus came out that way. The septum between "the anus and vagina was entirely whole. From these appearances I "then concluded that a mortification must have begun in the uterus; "and, from its contiguity, been communicated to the rectum; so that "nature, endeavouring to expel what was contained, and forcing it "against this part already mortified, produced this opening, and the "protrusion of the fœtus through it into the *rectum*.

"There was a large discharge of grumous blood and other substances "through the anus, which continued until the 26th, when the woman "died. The fœtus was perfect in all its parts, but wasted from its be-"ing some time dead."

Mr. *Nourse*, then one of the Surgeons of Bartholomew Hospital, examined the body, and has given an explicit dissection, with drawings of the morbid parts.

The *vagina*, *uterus*, *ligamenta rotunda*, *left ovarium*, *fallopian tube*, and *ligamentum latum* on that side, together with the hypogastric and spermatic vessels of the same side, were in a natural state. The *fallopian tube* on the right side, being traced from the *fundus uteri* almost to the *morsus diaboli*, was found confusedly uniting with, and opening into the *sacculus*, hereafter to be described. The *ovarium* on this side, with the *ligamentum latum*, was dilated into a large *sacculus* * of an irregular form, extending behind the *uterus*, to the posterior parieties of which it adhered, and passing on toward the left, was connected to that part of the *colon* that terminates in the *rectum*, and to the *rectum itself*.

In all its circumstances this case has considerable precision; the exact nature of it is verified by dissection. and the annexed plate, in the volume referred to, renders the whole history very clear.

We cannot close our view of this valuable "Dissertation" better, perhaps, than by quoting from it the practical remarks which the author makes on the management of those heretofore mysterious and mistaken cases.

"Dr. Hall, in his elaborate defence of the Cæsarean operation, con-"sidering all those cases as extra-uterine, recommends to cut through "the back part of the vagina, and to bring the child through the os "externum; and the same operation has been recommended by Dr. "Mackenzie and Dr. Kelly. There is a case quoted by Dr. Hall, "which happened to M. Lauverjat, in which the child was extracted "by an incision into the uterus by the vagina. There is a great want "of accuracy in describing the situation of the womb; but I can only "conceive of it, that it was in a retroverted state; and that the incision

* In this *sacculus* was contained the fœtus, and on the dissection we e found in it the placenta and several lacerated membranes; and from it there was a large opening into the *rectum*.

"was made through the posterior part of the vagina into the uterus. "Unless this were the position, I see no reason that there could be for "operating at all. Une femme enceinte pour la premiere fois, et par- "venue au moment d'accoucher, éprouvoit des douleurs si vives, que "Lauverjat voulut s'assurer de l'état des choses. Il fut surpris de "trouver la vulve occupée par un corps qui la remplissoit, et la depas- "soit, et qui cedoit a l'impulsion des doights, excepté dans le tems des "douleurs. En parcourant cette tumeur, il ne trouva à la circonfer- "ence qu'un cul-de-sac de demipouce de profondeur, sans overture, "qui peut permettre la sortie de l'enfant. Des conferes mandés pour "ce cas extraordinaire, voulourent voir aussi comment les choses se pas- "soit. Ils trouverent sur la tumeur, une dechireure qui interessoit "q'une partie de l'épaisseur de ses parois. Cette dechireure leur parut "le lieu, ou il falloit inciser. L'operation faite, le doigt entra dans la "poche dans laquelle l'enfant étoit contenu. Il sortit beaucoup d'eau "bourbeuse. L'enfant se presenta en franchit l'ouverture, qui venoit "d'être pratiquée, et a laquelle il se fit une petite dilaceration du coté "droit. Lauverjat ayant porté la main dans la poche, ne trouva aucune "trace de col ni d'orifice. Du reste il ne survint point d'accident, et "les ecoulment si firent a travers l'ouverture, qui se ferma par degrés. "Deux mois aprés, le col et l'orifice de la matrice etoient dans leur "état naturel. (*Sabatier de la Medicine Operatoire*, tom. i. p. 816.) "The event of this case would, doubtless, under some circumstances, "justify an operation; but considering the possibility, not to say pro- "bability, of all such cases being retroversions of the uterus, and hav- "ing the knowledge of two which terminated so favourably from the "sole efforts of nature, as Mrs. Walker and Mrs. F——s, it is im- "possible that I can recommend an operation, especially at the com- "mencement of the pains, and while the strength, habit of body, and "general health of the patient are uninjured. So long as these circum- "stances remain propitious, there is great reason to expect that the "pains alone may be able to rectify what is amiss, and to effect the de- "livery *per vias naturales*. The observation of Cicero, *Naturæ soler- "tiam, nulla ars, nulla manus, nemo opifex consequi potest imitando*, "should, as far as possible, be our guide in the practice of midwifery; "in which we find that women are seldom injured by a long continu- "ance of labour pains, provided their spirits are not hurried, nor their "blood inflamed, by injudicious attempts to give assistance, and by the "improper use of cordials and stimulants.

"If, however, nature gives up the point, if it is found that the pains "are unequal to the task of restoring the uterus to its place, and ac- "complishing the delivery of the woman, it remains to be considered, "whether it is not more to the advantage of the patient, that such an "operation should be performed, and that she should by this means be "released from her burthen, than that she should continue in the de- "plorable condition, which attends the slow process of discharging "a fœtus through an ulcerated opening in the vagina or rectum; in "which process there must always be great pain and suffering for many "months; and in which, though several women have passed happily "through it, yet others have perished miserably, exhausted with pain "and debility.

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"A justification of such an operation may doubtless be found, and "perhaps it may, in some rare instances, be adviseable; but we know, "from woeful experience, that incisions into the uterus have been so "very generally fatal, (in this country in particular) that the experi- "ment ought never to be tried, while any reasonable expectation can be "indulged of saving the patient by any other means."

Observations on some of the Principal Diseases of the Rectum and Anus, particularly Stricture of the Rectum, the Hæmorrhoidal Excrescence, and the Fistula in Ano. By THOMAS COPELAND, *Fellow of the College of Surgeons, and Assistant Surgeon to the Westminster General Dispensary, 8vo. London,* 1810. *pp.* 100. *Callow.*

MR. COPELAND opens this very interesting subject on the Art and Practice of Surgery, with a sensible and modest Preface, introducing the observations in an order perspicuous and methodical, without calling away the attention by any inducement from the valuable information given in the whole of this work. The contents are useful, true and important. They will furnish the practitioner with such arguments for treating the diseases, of which this pamphlet is the object, that the impression derived from it, must give a strong confidence in practice to him who is fortunate enough to study, digest, and embrace it. Whatever is advanced by Mr. Copeland, the reader will find supported by other authors; and whatever is opposed, will be seen to be a difference in opinion, by which the reader has the choice of forming his own judgment. The selections are arranged in the very manner of the most respectable of the ancient writers, either to corroborate the author's own sentiment, or to shew his variation from their text. We hail the time, and congratulate surgeons upon the event, that in this pamphlet we see not only antient, but living authors, quoted with all becoming respect; we see also in this work the scholar of industry, to whom the languages of the different authors he has referred to are open to his research.

Mr. Copeland has divided this important work into sections. The first of which is, "*Observations on the Stricture of the Rectum.*"

The rectum is here considered by Mr. Copeland, like any other part, subject to the consequences of inflammation, and the case aggravated from the action which that intestine is every day compelled to perform in the expulsion of the fæces. He supposes that obstinate cases of Ileus, and other chronic bowel complaints which resist treatment, have their origin in organic obstruction of the canal of the large intestines. He cites, in confirmation of this, authorities of the highest fame. He proceeds to state that strictures are not usually detected early in these complaints, and frequently not discovered till after death: hence, they have been deemed to be fatal, though the fatality was in the want of discovering them. After Mr. Copeland has given us the benefit of the opinions of most ancient authors, and after he has paid that high tribute to Ruysch which we forbear to quote, he proceeds to inform us of that of the moderns. Dr. Sherwin and Dessault are entitled to high notice for what they have imparted on this subject. And when he has thus

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disposed of the author to whom he has referred, he concludes with this summary.

"But though those who are afflicted with this disease are sometimes quickly carried off with symptoms resembling those of ileus, this is not the most usual form of the complaint, for it commonly assumes a more chronic character. It attacks people of both sexes, and of almost all ages; but is most common about the middle age, and I think, as far as my experience goes, that women are more frequently affected than men.* The first symptom of the disease is an habitual costiveness; but this is so frequent an occurrence, and produced in so many ways, that it is not likely that the cause should be sought for in an organic affection of the rectum; mild purgatives are resorted to, and the symptom being relieved, the cause is no longer sought after.

"When this has subsisted for some time the patient complains of what is called piles, and what is often really so, as a consequence of obstructed circulation in the parts. The remedies usually given in such cases are applied, sometimes with relief, but more frequently otherwise; and then the good old maxim of the inexpediency of curing piles, perhaps rescues the practitioner from the discredit of failing to relieve his patient. The piles are sometimes removed by ligature, or excision, and this gives a temporary abatement of the most painful symptoms, while the cause of the disease is still unknown.

"In a short time, as the gut continues to decrease in diameter, the efforts to expell the fæces become more violent, and the consequent progress of the disease more rapid. The stools, which have been long evacuated with difficulty, become contracted in size, appearing like earth-worms in their form, or small pellets. In this stage it is sometimes, in the male, mistaken for enlarged prostate gland, but if the finger be introduced into the rectum, the gut will be found either obstructed with small tubercles,† or intersected with membranous filaments;‡ or else the introduction of the finger will be opposed by a hard ring of a cartilaginous feel, composed of the diseased inner membrane of the intestine,§ instead of that regular tumour on the anterior part of the rectum, which is formed by an enlargement of the prostate gland. As the disease advances, the fæces become more fluid, and there is a thin sanious discharge from the anus, accompanied with tenesmus; not however the painful tenesmus of dysentery,‖ but with lest distress and less irritation of the parts than in that disease.

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* The cases which Mons. Derreçagaix relates in Dessault's journal, are principally women, and the most aged is only forty-six years old. Mr. White, in a paper in the London Medical and Physical Journal, Oct, 1809, remarks, that this disease is most common at the decline of life; but his own experience does not bear him out in the assertion, for of eight cases which he gives, six are under fifty years of age. Mr. White considers the disease as necessarily fatal, but he does not seem to have heard of Mons. Dessault's paper.

† Dessault loc. citat.

‡ Bonetus loc. citat. Case 5 in this book.

§ Morgagni, annulo quasi quodam constringi videretur digitus, loc. citato. Adeo induratum ut anceps hærerem an carnosum an cartilaginosum esset dicendum. Ruysch, t. iv. obs. 95.

‖ Sherwin.

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"During this time the constitution suffers so little, that the patient might be supposed, from appearance, to enjoy full health. But the ravages of the disease now begin to be felt in their effect on the general habit. Frequent eructations of air confined in the intestines, added to the other symptoms, torment the patient, and render his life miserable. This symptom is so constant, that if it did not occur also in affections of the kidnies and other complaints, it might be regarded as pathognomonic; but I think it prevails to a greater degree in this than in any other disease.

"At this period abscesses very frequently form in the neighbourhood of the anus, and sometimes break into the vagina in the female, and the fæces are discharged through the fistulous orifice. In the male, an adhesion takes place with the bladder and the abscess* discharges itself with the urine, and sometimes fæces and wind are voided by the urethra. But more frequently the matter makes its way through the nates, as in cases of common fistula, for which disease it is not unfrequently treated.

"The patient often continues a long time in this distressing situation, for none of the vital organs are affected, till, at last, worn out with the pain and the discharge, or perhaps the total obliteration of the rectum, he yields to his fate. This is usually the progress and issue of the disease, when it is not early discovered, and I must confess also, sometimes the termination when it is; that is, when the parts are attacked with cancerous ulceration. But I believe that, when the cause of the complaint is ascertained in its early stage, the resources of the healing art are sufficient very materially to relieve, and often to cure it altogether; subject, however, like strictures in the urethra, to the necessity of now and then passing a bougie for a considerable time after the symptoms are removed.

*The rapid progress of disease, from a very trivial origin, in parts subject to continual motion, is very remarkable, in many instances, besides that one under consideration; for this reason, a simple wound near the organs of deglutition is so difficult to heal; for this reason perhaps it is that pulmonary consumption is so fatal a complaint, for the parts being necessarily in constant motion, have not the opportunity afforded them of recovering from an attack of disease."

The second Section is, "*On the Causes and different Kinds of Strictures of the Rectum.*"

In the treatment of this, as in the former section, he refers back into the researches of the Antients; establishes his foundation upon this classic ground, and adroitly concludes in the following manner:

"First, it may be remarked, that we meet with no description of the disease, in any author that I can find, before the time of Wiseman; and

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* Petit Œuvres Posthum. tom. ii. p. 93, the contrary also occasionally takes place, and urinary calculi are voided by the rectum. See Paulus Ægineta, and Memoirs of the Medical Society, vol. iii. 496, 542.

† See some very important observations on this subject in Mons. David's Memoir on the Effects of Motion and Rest, translated by Justamond. Also, Mons. Bazille sur les Effets des contre Coups en divers parties du Corps. Prix de l'Academie de Chirurgie, tom. iv. quarto.

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the accuracy of the antient writers of surgery, in their history of diseases, is universally allowed, whatever may be said of some of their modes of cure. It may therefore, I think, be fairly inferred, that either the complaint did not occur so frequently formerly, or that it was overlooked by physicians and surgeons, who suffered scarce any thing which related to diseases altogether to escape them. The case in Wiseman, indeed, was the consequence of the operation for the fistula in ano, as it was then performed; but, I believe, he was the first who has described any species of the disease, and he treated it in a way that was well worthy of the imitation of his successors, if they had sufficiently considered it: but I shall say more of this when I come to the treatment of the disease.

" Soon after Wiseman, as I have related, many authors have described the disease, and they all concur in considering it as inevitably fatal, until Mons. Petit* gives a hint, that when it was a venereal symptom it was curable, by the usual remedies for that disease; but that in other cases he had never seen it relieved.

" Dessault saw it so frequently in combination with other symptoms, decidedly venereal, that he did not hesitate at once to put his patients under a course of mercury, and with a success that fully warrants us in considering it as, very frequently, a symptom of the venereal disease. He did not, however, trust solely to the effects of this remedy for a cure, for he saw that the particular functions and morbid alteration of the part, required a particular local treatment, independent of the medicine which was to cure the constitutional disease. He therefore, during the exhibition of mercury, every day introduced into the rectum tents imbued with some ointment, of a greater or less size, and for longer or shorter time, according to the circumstances of the case, and by this combined local and constitutional treatment generally cured his patient.

" Mons. Dessault does not seem, indeed, to consider the tent of so much importance in itself, but only as the vehicle of his medicaments. Be this as it will, however, he relieved his patients of a disease, which, till then, was generally considered as a fatal one.

" It should be remarked that he ascribes the complaint to many other causes, besides the venereal disease, as to rheumatism, to gout, to cutaneous complaints; but notwithstanding this, he gave mercury, and mercury relieved them. Richerand* also, in his Nosographie Chirurgicale, considers the stricture of the rectum as sometimes arising from the venereal disease.

" If the relief of a complaint by mercury (added to the use of the tent or bougie), which is often accompanied by less equivocal symptoms of the venereal disease, and which has been considered as constantly fatal, be not thought sufficient to establish its syphilitic origin and nature, this opinion may, perhaps, derive some additional strength,

* Loco Citato.

† Le retrecissement de l'extremite inferieure du rectum est quelquefois un vice de conformation; mais plus souvent l'effet de l'epaississment venerienne de ses parois, de tous les symptoms de l'affection syphilitique il n'en est point de plus grave.—Nosographie Chirurgicale, Paris, 1808, tom. iii. p. 418.

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when we reflect how often the neighbouring parts are attacked with complaints, of which no practitioner doubts the venereal origin.

"The condylomatous excrescences, which we see every day surrounding the anus; the large rhagades in these parts, though not so frequent a disease, are known to be venereal. And these, also, in addition to the constitutional remedy, require a local treatment adapted to their nature, as well as the stricture of the rectum. Even the fistula in ano is sometimes the consequence of the venereal infection*, as has been remarked by Mr. Pott and Le Dran.

"After all, I do not by any means intend to assert, that it is always, or even most frequently, a symptom of the venereal disease. If it is met with in combination with other syphilitic complaints, there can be no doubt of the propriety of using mercury. And if it is relieved, in such cases, by mercury, added to the use of the bougie or tent, I think it is reasonable to employ, and to expect benefit from, the same means in other cases, where it may be the solitary symptom, and where we are disappointed in our other methods of cure."

The Treatment of the Stricture of the Rectum, is the subject of the third Section.

"It has frequently been remarked, says Mr. Copeland, that he who knows a disease cannot be much at a loss how to treat it; and although this may not be true, perhaps, in its fullest extent, I believe no one will dispute, that the art of curing diseases advances, in some sort of proportion to the increase of our pathological knowledge." From this commencement in the treatment, Mr. C. proceeds, grounding all his observations and practical science on the comparative treatment of former authors, and their elucidations of the disease. After having advanced thus progressively, in stating what has been done by others, and weighing in his own judgment what the result upon the whole should be, he closes the subject with the following aphorisms, and thus concludes the third Section.

"Before I quit this subject, it may not be unuseful shortly to recapitulate some of the most important circumstances of the disease and its treatment.

"First, That a stricture of the rectum is by no means so uncommon a disease as is usually imagined, and that it has been hitherto generally considered as necessarily fatal, because it has been discovered only in the last stages, or by dissection after death †.

"Secondly, That many of those obstinate cases of constipated bowels, which are of long duration, arise from an organic obstruction to the passage of the fæces, and that this obstruction is most frequently so situated as to be within the reach of surgical aid.

"Thirdly, That it is requisite, in such cases, to examine the anus with the finger, or if the symptoms be strongly marked, and there be no obstruction within the reach of the finger, to examine it with a rectum bougie.

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* Pott's Works, by Earle, vol. iii. p. 87. Le Dran, Observ. de Chirurg, tom. ii. obs. 84.

† See some observations on the diseased appearances of the rectum, by Dr. Baillie.—Morbid Anatomy, page 111.

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"Fourthly, That the use of internal medicines alone will be unavailing in such cases, and that nothing without the use of the bougie affords any hope of relief to the patient.

"Fifthly, That the disease is much less frequently of a cancerous nature, than from the description of authors it may seem to be.

"Sixthly, That it is often combined with symptoms of the venereal disease, and, in such cases, is more readily relieved by mercury, added to the use of the bougie, than by any other means.

"Seventhly, That if the disease is often found in combination with syphilitic symptoms, it is fair to infer that it may, in some cases, also, be the solitary symptom, and that if it resist the local treatment, and there be reason to suspect venereal mischief in the habit, it is right to try the effect of the mercury at the same time.

"Lastly, That whatever be the nature of the disease, provided it be not true cancer, it is necessary to continue the use of the bougie, at intervals, for a considerable time after the free passage of the fæces has been established, and to return to it whenever there be any symptoms of a recurrence of the complaint."

"*The Fourth Section treats on the Hæmorrhoidal Excrescence.*"

Mr. Copeland very candidly states, that the subject of this section has been so very accurately described, and distinguished from other complaints, which it somewhat resembles, by Sir James Earle and some others; and is a disease so well known to surgeons, that it becomes unnecessary to enter into a minute detail of its nature and appearances. But he adds, that he who has no other opportunity of informing himself on this subject, than what is afforded him by the English writers, who have treated or touched on it, will be apt to conclude that the extirpation of such excrescences, either by ligature or excision, is always a safe and successful operation. Sir James Earle has powerfully urged, in his edition of the works of the immortal Percival Pott, the removal of them by ligature, and his cases were successful. And other surgeons have recommended excision, in cases of which the treatment has been also successful. But Mr. Copeland has found from practice that the operations by ligature and excision in some cases have proved fatal. He has not relied upon his own bare assertion for the verification of these facts; but has applied his knowledge and his reading to the establishment of his own opinion by that of others. *Petit* has related cases, where the plausibility of success *a priori* was the most promising, and where by ligature, the patients died. From such instances, in similar cases, if there be any system adopted for removing these obnoxious and vexatious excrescences without a chance of incurring such unexpected and dangerous consequences, certainly Mr. Copeland has done well, and given us a lively instance of the value of that activity of mind, which was thus awake to so laudable a duty. If ligature and excision be sometimes from an unforeseen state of the constitution of a patient liable to produce fatal consequences, surely that method which does not expose a patient to the same danger, is and must be acknowledged to be an improvement. And here an opportunity is given to remark that Mr. Copeland has displayed a great deal of that fire of genius which, when cultivated, must give us some idea of the character of what we expect from a true surgeon.

Mr.

Mr. Copeland has a just apprehension of the hazards that are incurred both by excision and ligature in these cases; and points out a middle course which promises to avoid the danger of both; in which he is sanctioned by the authority of Hippocrates.

"Among the various modes of extirpating the tumours, which are suggested or recommended by Hippocrates, who has described the disease and its cure almost as well as any of his successors, that of taking them off (I suppose pinching them off, ἀφελεῖν auferre,) with the fingers, deserves to be mentioned as a sort of medium between the ligature and the incision, comprehending, in cases where it is practicable, most of the advantages of each without the dangers of either. This rude operation of Hippocrates, (which he says may be done without telling the patient any thing of the matter,) or at least the essential principle of it, namely, of producing some kind of contusion at the time of removing the excrescence, is worthy of consideration. It is a well known fact that the instinct of animals directs them to bite off the umbilical chord, when they produce their young. The laceration which the parts suffer in this natural operation prevents all hæmorrhage from the chord. The life of the young is thus preserved, until the circulation is accommodated to that alteration which is necessary after birth, when the fœtus becomes a perfect and respiring animal."

Among other remedies to which Mr. Copeland has called our attention, is the frequent injection of cold water up the rectum, with the addition of a few grains of sulphate of zinc, as employed by Schmucker. He likewise relies much upon the application of bougies in this complaint, as practised by Monteggio, an eminent Italian surgeon.

Though the works of Hippocrates are open to every surgeon, yet the merit of bringing into notice a fact from this father of the art, has been left to Mr. Copeland; a fact that will probably supersede the employment of excision or ligature.

We think, and it is but barely a presumption, if our Author had pointed out that the common forceps, sharply dentated, would be the properest instrument to embrace the stem of the hæmorrhoid, so that by the lacerating action of it, any hæmorrhage would be prevented, that the direction would have been useful. And as to ligature, none being made, no consequence from it could follow. The forceps should be applied to bring forward the hæmorrhoid, and on its division, all which is left within the gripe of the forceps will be sufficiently lacerated to stop all hæmorrhage.

The fifth Section treats of *Fistula in Ano.* The author very justly observes in a note, page 58:

"It is remarkable that a disease of so frequent occurrence should have excited so little of the attention of the English surgical writers. Fewer cases of the disease have been published, and fewer remarks on the infortunia and the anomalous circumstances attending it during the progress of the cure, than almost any other disease. Except the classical treatise of Mr. Pott, who has by no means exhausted the subject, there has hardly any thing appeared on this subject for the last century."

The point of this section goes chiefly to two circumstances, which render the operation of *Fistula in Ano* more complex and uncertain in its event. From the hæmorrhage which sometimes follows; and from the cause of the disease sometimes being too remote to be removed by the operation. The hæmorrhage has been known to be fatal. The stricture in the rectum with a morbid state of the inner membrane of the gut, is far from being less frequently fatal; and where this is the case, the fistula becomes only a symptom, or consequence of the original disease.

Our author says, "the degree of inconvenience therefore which the fistula produces, and the other circumstances of the more important disease, are to be taken into consideration before the operation be resolved on, in cases of this description.

And here also Mr. Copeland appeals to authorities which support his well intentioned improvement.

The latent sinuses which are to be found in the complex cases of fistula in ano, have not been amply treated on. A dependance on the excellent direction of Mr. Pott has given a confidence to the operative surgeon which makes him blind to any farther inquiry; but it must be remembered that the operation can do no more than relieve the cause within it's scope; and that the operation is not the less valuable from not doing more than what Mr. Pott even intended it should do.

The remaining sections consist of well narrated Cases, illustrative of the Author's observations on the several diseases of which he treats. In conclusion, we may venture to recommend this work to the profession, as containing the most correct and clear account of a class of diseases often obscure, and too frequently neglected.

THE EDINBURGH MEDICAL AND SURGICAL JOURNAL, No. 24, FOR OCT. 1810.

Article I. "*An Essay towards an Inquiry how far the Effluvia from dead Animal Bodies, passing through the natural Process of Putrefaction, are efficient in the Production of malignant pestilential Fevers; and how far such Effluvia are capable 'of exciting a putrefactive Emotion in all other' living 'animal Substances exposed to their action?'*" By C. CHISHOLM, M. D. F. R. S. &c. &c.

IN this very learned essay, Dr. Chisholm contends. "That the effluvia from dead animal bodies, passing through the natural process of putrefaction, and unrestrainedly diffused through the atmosphere, are injurious to living animal bodies exposed to their action, no more than in as much as their fœtor is offensive to the olfactory nerves; and that, when confined to a very limited space, and their principles, instead of entering into new combinations, are concentered, and in that state applied to, or received into, the bodies of living animals, these effluvia may act as a poison, producing, in the living animal frame, fever, perhaps, but incommunicable, or incapable of propagation by contagion;—or instant death, by a sudden exhaustion of the living principle." To support this opinion, the author does not trust to chemistry; he thinks, that to draw conclusions from the analysis which Chemists have given us of the gaseous

ous products of putrefying animal substances; and to apply these conclusions to the investigation of the causes of diseases supposed to be their peculiar offspring, would be as unphilosophical as they would be fruitless. The clearest results would be only conjectural. He therefore deems it more rational to pursue his inquiry by stating facts: "facts obvious to the senses, evident to every understanding, presenting a clear and sensible line of discrimination, separating them from all the pretensions of chemical or theoretical speculation."

Dr. Chisholm then adduces a variety of interesting facts, from ancient and modern writers, as well as from his own experience. The conclusions which seem to result from the premises, which he forcibly and perspicuously states, he apprehends to be, 1. "That the theory of ingenious chemists, founded on experiments or speculations, to prove the pestilential influence of putrid animal effluvia, receives no support from practical knowledge, or the known economy of nature.

2. That in no known and well ascertained instance, are putrid animal exhalations productive of pestilential fevers.

3. That in a concentrated state, they either become a mephitic poison, producing asphyxia and instantaneous death, or seem to produce fevers of a malignant, indeed, but not pestilential nature.

4. That in every instance which seems hitherto to have been investigated, wherein putrid animal effluvia have been supposed to be the cause of epidemic malignant fever, other agents of a less dubious, better known, and well ascertained nature, exist, such particularly as marsh miasmata, and the exhalations from stagnant water, and damp unventilated places; and the types or forms of such epidemics thus attributed to putrid animal exhalations, are such as are known to be the peculiar product of marsh miasmata, being uniformly marked with exacerbations and remissions, or paroxysms and intermissions. Contagion and marsh miasmata, may act conjointly in the same person, but the character of each respective action is manifested; but when marsh miasmata and putrid animal effluvia are present at the same time, no action but that of the former is manifested—the latter exhibits none of a morbid character.

5. "That all, or almost all those manufactures, in which putrid animal exhalations are evolved, are no further injurious than by being nuisances by the fœtor which they emit.

6. "That as nuisances, but not as causes of disease, they should be as much as possible removed from the habitations of men.

7. "That putrid animal exhalations, which cannot be supposed to possess within themselves, or which have not, from the circumstances of the situation or manufacture in which they are evolved, a principle of decomposition, and a capacity of entering into new combinations; and are consequently the true uncombined product of animal putrefaction; are not injurious further than by their offensive fœtor.

8. "That very little probability exists that putrid flesh, rendered so by the natural process, which from selection, accident, or necessity, becomes the food, is injurious to the health of men; a provision being made in the gastric juice of the stomach, by which such food is rendered not only harmless but nutritious.

 9. " Viewing

9. "Viewing the whole of the subject, both in relation to the pestilential epidemics of brute animals, and of the human race, and inquiring into their reciprocal capacity of being communicable from the one class of animals to the other, I imagine there is sufficient evidence in our possession, that such capability does not exist; that the aura, or emanating gas from the diseased brute animal, does not produce disease of any description in a healthy human being exposed to it; that a human being feeding on, or receiving into his system, the flesh of a pestilentially diseased brute animal, may certainly have disease excited thereby in his system, but a disease of a nature altogether new, and terminating with him, either in cessation of disease or extinction of life; that the same series of cause and effect may take place, when brute animals feed on, or take into their system, the flesh of a pestilentially diseased human being; but that there is solid ground of belief, that such series of cause and effect is provided against by the instinct of the former, directing them to what is beneficial to, guarding them against what may be destructive of life.

10. "That as there is a necessity for the dissolution and reduction to their primary elements of animals, in order that the series of succession of animated nature may be maintained; so would it evince an unaccountable deviation from the compensative economy of God, should the process of that dissolution and reduction be productive of injurious effect, when the ultimate purpose of it is beneficial and compensative.

11. "That the dissolution and reduction to their primary elements of animals, may be considered as the physical link connecting the dead and the living, inanimate and animated nature—the one and the other mutually depending on each other, reciprocally contributing to each others support.

"*Finally*, that the result of the whole is, that in this, as in all things else, the wisdom, the mercy and goodness of God are manifested; that in this, as in all others, 'the works of the Deity are known by expedients;' for as the putrefaction of dead animal bodies is necessary to the accomplishment of the purposes of Divine Providence, for 'that which thou sowest is not quickened except it die;'—so the living, for whose existence it is, in a general sense, necessary, either do not experience it as an evil, are removed from, or have a compensation for it."

The second article presents us with an account of the endemical fever of Sicily, by Mr. Boyle, surgeon to the 62d regiment of foot. The symptoms varied little from those commonly described by authors; but the paper is highly valuable, from a successful mode of treatment being decidedly established. Two of the first patients died, and as the appearances on dissection enabled the author to form a more correct notion of the disease, and to determine upon the proper method of curing it, we shall insert his account of them. "On opening the scull, nothing uncommon was discovered on the external surface of the dura mater. Its sinuses, however, were gorged with blood, and the small veins, leading to the longitudinal one, much distended. Between the dura and pia mater, there was a small quantity of serum diffused. And the surface of both, in the neighbourhood of the longitudinal sinus, was covered with that sort of matter which is observed on the peritoneum and other membranous parts which have suffered from inflammation. Adhesions had

had also taken place; and in two or three places small abscesses were formed. In the ventricles, and within the substance of the brain, nothing uncommon was found. The dissection of the second case presented very similar appearances. The evidences of inflammation were indisputable; in the first case, bleeding was not practised till the day preceding death, but even at that advanced period of the disease, instantaneous relief followed the insertion of the lancet. The second patient died without having lost any blood. Afterwards, when bleeding was resorted to in the first stage, not a single man, out of 240 who were attacked with fever, perished. This practice, in such cases, has been introduced into the army only recently, but the effects have proved highly beneficial.—Cold effusion and purgatives were also employed, but the remedy on which Mr. Boyle chiefly relied was copious bleeding, in the use of which he was directed by the headach and giddiness, rather than by the state of the pulse. He prefers taking the blood from the temporal artery. The Sicilian physicians generally applied leeches to the temples, and gave cold, acid, drinks. These facts are very important, and coincide with what we must regard as an improved mode of practice in this country, in the treatment of fevers. In the commencement, signs of inflammation are generally present, and by removing them, we often succeed in cutting short the fever, or at least in mitigating its violence and duration; hence unquestionably is derived the good effect of cold effusion, of purgatives, and of local bleeding. In some instances, blisters applied to the head were of decided advantage, particularly when the giddiness which generally affected the patient, was protracted.

Art. 3, contains an Account of a *Disease of the Throat of an uncommon description, which occurred in the Hurrianah District.*

The first case is detailed by Lieutenant Higgins in a letter to Mr. Ramsay, Assistant Surgeon, 1st. Bat. 2d Regt. N. I. Bengal, dated Camp, Ballealee, 8th August, 1809, from which we extract the following particulars. "A sepoy, two days ago, apparently in high health, was found dead in his bed. No person being able to account for so sudden a death, it was attributed to the bite of a snake. Yesterday another man was seized in the following manner: He complained that he felt a severe pain in his throat, and died in the course of a couple of hours. Last night I was called up, another sepoy being taken ill. I immediately went to him; he was able to give a distinct account of what he felt: he complained of a dreadful pricking pain in his throat, which he felt gradually swelling; and he began to feel great difficulty in breathing or speaking. He continued in this state till his voice went completely, when he lay down and died. He was not an hour and a half ill altogether, and did not survive ten minutes after his voice failed him; his eyes were fixed from the first, which he complained of." There were no spasms about the neck, mouth, or temples, or any aversion to liquids. The three unfortunate sufferers were of different ages and casts: a Brahmin, a low cast Hindoo, and a Mussulman. It was not ascertained whether the two first had eat any vegetables during the day. The last man had not tasted a single thing the whole day previous to his death, it having been a day of some religious ceremony among the Brahmins, which forbid

them

them tasting food. The water at Ballealee is good, and the inhabitants are entirely ignorant of the disorder.

Mr. Ramsay states the case of a Khidmutgar boy who was attacked with a violent pricking pain in his throat, in a similar manner to the cases before related. "On the right side of the Os Hyoides, there was a considerable tension and hardness; his pulse was about 74, and of natural strength. He had no fever. In fact, in every other respect, he was perfectly well." A blister was applied, and he took ʒs. of the sulphat of zinc, which made him vomit immediately. After the vomiting, he said the prickles had gone out of his throat. Next morning he was perfectly well, and the tension and hardness in the throat were gone." Another case was cured with a dose of white vitriol. Mr. Ramsay had no opportunity of dissecting any case of this singular disorder; of the nature and cause of which he has been unable to form any idea. He thinks, however, that it resembles Cynanche Trachealis. Dr. Burt remarks, "that the symptoms bear a very great analogy to those of a disease prevalent, about twelve or eighteen months ago, among the horses of the Company's stud, by which many very fine animals were lost.— The Veterinary Surgeon found no remedy whatever. Horses we know cannot vomit. From the appearances on dissection, the Veterinary Surgeon pronounced the disease to be similar to the croup in the human species."

The 9th article describes with great accuracy, a *Case of Carditis, with the Appearances on Dissection.*

"A. B. On the 21st of April, was delivered of a fine healthy child. The labour was natural and easy; nothing uncommon occurred. On the following morning, I found her as well as I wished. In the course of the same day, however, whilst sitting up in bed, for the purpose of putting the child to the breast, she was suddenly seized with oppressive respiration, and complained of severe pain in the loins, particularly referable to the right side. When I saw her in the evening, I found her in a semi-recumbent posture; her breathing was difficult, short and oppressed; great anxiety pourtrayed in the countenance; pulse 130, small but regular; skin dry, but of a moderate temperature; tongue white and moist; severe pain in the loins. On the following day, the pain in the loins went off, and she now complained of severe oppression about the precordia; breathing short and oppressed, with severe pain at the back of the neck, and between the shoulders; occasional vomiting; pulse quick but regular. Blisters were applied, and a cathartic administered; blood was also taken away; but it exhibited no marks of inflammatory action, such as the buffy coat, or a firm, contracted, or cupped-like crassamentum. On the third day there was a considerable remission of symptoms, which lasted, however, only for a short time. They again returned with equal violence, and continued for two days, without any mitigation. On the sixth day, the pains entirely went away; her extremities became cold, and her whole body was bedewed with a cold, clammy perspiration;— pulse fluttering, and too quick to be counted; respiration frequent but comparatively easy, except that at intervals there was to be observed a convulsive catch, as it were, somewhat approaching to singultus; there was a superabundant secretion of mucus in the bronchiæ. In this state I did

I did not expect her to remain many hours; but during the night she had some sleep, which she had not experienced since the attack; and awaking appeared relieved, her countenance having assumed more of the natural cast; pulse regular, about 100; breathing easy; complaining of no pain; stools frequent, and passed away involuntarily, as did her urine. She continued much in this state for three days, when her tongue became suddenly enlarged to thrice its natural size, so that it could not be kept within the teeth, and as hard to the touch as a board, and dry, which it had not been during the complaint. On the following day, which was the tenth from the attack, she died. On the following morning I examined the body.

On raising the sternum, there was observed, on the external part of the pericardium, a large patch of coagulable lymph, about four inches in circumference. On cutting into the pericardium the cavity was found to contain three ounces, or more, of a serous fluid; the heart was enveloped in a covering of coagulable lymph, about the eighth of an inch in thickness. The whole interior surface of the pericardium was also coated in the same way, and adhered strongly to the heart at its apex. This coat of lymph was easily separable, as it did not appear at all to adhere, except when the pericardium was attached to the heart. That portion of the left lung, which passes down by the pericardium, adhered to it through the medium of effused lymph; the lungs were sound, both on the right and left side; there were no adhesions with the pleura, in any parts of the chest, except at the anterior part of the pericardium, which was attached to the under surface of the sternum, and cartilages of the ribs over it. None of the abdominal viscera were in the least diseased; the uterus was about the size of a small melon, and perfectly healthy."

In his able report of diseases at the public dispensary, Dr. Bateman describes some cases of continued fever accompanied by a distressing and unmanageable affection of the bowels, while the head remained free from disorder. "Active purgatives, even when conjoined with opiates, appeared rather to augment than to mitigate the disorder of the bowels; nor did the neutral salts, or rhubarb, afford a more decided benefit; while on the other hand, opiates or astringents alone were manifestly injurious; giving rise to parched tongue, increased heat, and a more frequent pulse, without correcting the condition of the alvine excretions. In one or two cases, small doses of mercurials, as of the hydrargyrus cum creta, appeared to be beneficial, when repeated three times a day."

In two cases of tænia, the oil of turpentine was given in the large doses which have recently been most successfully prescribed in this capital. In the first patient, "it operated speedily as a purgative, without occasioning any sickness, or strangury, and expelled the worm: in the second, a worm of several feet in length had passed from the intestines, immediately before the patient applied to the dispensary, but considerable pain and uneasiness in the abdomen remained. She took an ounce and half of the oil of turpentine, which began to operate in the course of half an hour, and brought away four slimy stools, but without any worm: she has had no pain or uneasiness since that time. The remedy excited

excited no pain or difficulty in passing the urine, and little thirst; but she was sick at each operation by stool, and felt considerable giddiness during the whole of the afternoon."

Hortus Kewensis; or, a Catalogue of the Plants cultivated in the Royal Botanic Garden at Kew. By the late William Aiton. *The second Edition, eelarged. By* William Townsend Aiton, *Gardener to his Majesty*, Vol. I. 8vo. *London*, 1810. *Longman, Rees, and Co. pp.* xl.—407.

With peculiar satisfaction we notice a new edition of the *Hortus Kewensis*. The relation that botany has to the art of medicine must render the re-publication of this work, become scarce, and of high price, extremely acceptable to those who know and appreciate the value of this auxiliary science. The original edition had the character of being useful and scientific beyond any thing of the kind, since the *Hortus Cliffortianus* of Linnæus. Mr. Aiton, in that edition, received the assistance of Dr. Solander while he lived, and afterward of Mr. Dryander. To these learned and acute botanists, the work is considered to be indebted for the whole of its science: all the specific characters, the collating of synonyms, the observations, the English names, the habitats, even the chronology, or the time of the introduction of various plants, are understood to have been furnished by these gentlemen. To this new edition the valuable assistance of Mr. Dryander is believed to be extended.

The *Hortus Kewensis* is professedly a compilation, but a compilation made under the eye of a master capable of supplying the desiderata, and knowing where to make an election. In its plan, the systematic arrangement laid down in Willdenow's edition of the *species plantarum*, is followed. All our modern periodical publications are regularly referred to, both for the sake of the English reader, for whose use the catalogue has been principally compiled, and to shew to those foreigners into whose hands it may fall, that Englishmen have not of late years been inattentive to the advancement of their favourite study.

We hope, in a future number, and when the remaining volumes come before us, (only the first volume is yet published), to go more distinctly into the merit of this valuable work; and which we have, from this specimen, no hesitation to recommend unreservedly to those of our readers, who either find delight in the science of Botany, or are at all sensible of the advantages that accrue to the theory and practice of medicine, from its study.

An Account of Diseases in an Eastern District of London; from Sept. 20 to Oct. 20, 1810.

ACUTE DISEASES.	
Cholera	5
Variola	8
Rubeola	7
Pneumonia	2
Rheumatismus Acutus	3
CHRONIC DISEASES.	
Catarrhus	5
Tussis	10
Dyspnœa	7
Tussis cum Dyspnœa	8
Phthisis Pulmonalis	3
Hæmoptysis	4
Hydrothorax	2
Anasarca	3
Palpitatio Cordis	1
Ascites	3
Hepatitis Chronica	2
Diarrhæa	14
Enterodynia	5
Dyspepsia	7
Gastrodynia	6
Amenorrhœa	3
Chlorosis	2
Menorrhagia	2
Rheumatismus Chronicus	6
PUERPERAL DISEASES.	
Menorrhagia Lochialis	3
Stranguria	2
Ephemera	3
Dolor post Partum	5
INFANTILE DISEASES.	
Aphthæ	2
Pertussis	4
Tabes Mesenterica	2
Scrophula	1
Tinea	2

The uncommonly fine weather which we have lately enjoyed, seems to have carried us back to the season of summer, rather than to have conveyed us through the autumnal quarter towards winter. From the state of atmosphere and the temperature of the air, which generally prevails at this season of the year, it is natural to expect the appearance of those diseases which are connected with it, and which constitute the general epidemic of the autumnal period. But as the weather, which is usually expected at this time of the year, has been protracted, so the appearance of diseases which usually accompany it has also been protracted, or at least they have been attended by a train of symptoms unusually mild. Complaints of the bowels have indeed been frequent. Diarrhæas have been numerous, but they have seldom proceeded beyond the point at which they are generally found to have some salutary influence upon the constitution; and when, from an impatience to get rid of them, or an apprehension that the patient would be too much weakened by the evacuation, astringents have been had recourse to, they have generally been succeeded by pains in the stomach, oppression about the præcordia, want of appetite, or indigestion. Cholera has occurred in a few instances, but this

this has, for the most part, appeared in so mild a form as to require very little more than a plentiful use of warm diluting liquids. In some cases, however, an occasional anodyne has been necessary to quiet the excessive action of the biliary system, or to secure to the patient the advantage of a few hours sleep after the anxieties and fatigues of the day.

MISCELLANEOUS INTELLIGENCE.

A case of small-pox occurring twice to the same individual, who had also had chicken-pox, has recently come under the observation of Mr. Hewson. The marks which remained on the face, after the first attack of the disease, were very apparent, whilst the pustules of the second were distinct, and were preceded by the eruptive fever in the usual way. Mr. Hewson inoculated two children with some of the matter; one of them, an infant at the breast, had only "a slight sprinkle of pustules, the other had a large crop of distinct small-pox, which began to turn about the ninth day." If care were taken to record them, such instances would not appear rare. An intelligent observer has remarked, that where small-pox has occurred after vaccination, the disease has uniformly been mild; but in general, when small-pox has affected the same patient twice, the second attack is severe.

The purgative method of curing fever, so strongly recommended by Dr. Hamilton of Edinburgh, is gaining ground in this metropolis. It has proved eminently successful in Scarlatina, as well as in Typhus.—Bark, acids, and wine, are now resorted to by many practitioners, only when the febrile action has ceased, to restore the strength of the patient.

Adam Burt, M. D. Superintendant Surgeon, Muttra, has discovered a blistering fly, a species of Meloe, which possesses blistering powers much superior to those of the Spanish fly in common use. As specimens of it have been sent to Sir Joseph Banks, we may hope shortly to be favoured with a more enlarged account of an insect, which promises to become a valuable addition to our Materia Medica.

From the French Gazette de Santé, we learn, that when the horse-chesnut is ripe, and drops from the tree, if we strip off the brown husk which covers it, and pound the kernel in a mortar, then apply the farina thus obtained to the soiled parts of linen, and afterwards wash it, the spots will disappear as completely as if soap had been used.

About the period when the *Eau Medicinale D'Husson*, after having flowed its course in France, was introduced into this country, the Parisians were entertained with wonderful accounts of an "*Eau de Pradier*," or "*Topique anti-arthritique*." The liquid is directed to be poured

poured on a linseed meal poultice, with which the limbs, especially the legs of the gouty patient are to be covered. The effects of this application are, the skin becomes soft and moist; a humid exudation of a white colour bedews the surface, and some of it generally adheres to the poultice. A painful burning sensation is felt in the sole of the foot, and in the heel; this sometimes increases to a violent degree, although redness and inflammation do not occur. When the applications have been often repeated, weakness and emaciation of the legs take place; the soles of the feet become extremely tender; and some persons are affected with general agitation, restlessness, and increased activity in all the functions. Mons. Pradier asserted, that the composition was purely vegetable, and defied any chemical tests to analyse it; but offered to reveal the secret for a considerable sum of money. Many people tried the remedy, and, as usual, some of them were relieved, whilst others suffered sufficiently to excite alarm in the profession. In one journal, Pradier was abused, and his remedy vilified, whilst in another their merits only were attested.

From an analysis of the *Eau anti-arthritique*, in the Gazette de Santé for November 1809, it appears to consist of a spirituous infusion of saffron, lime-water, and *gum-guttæ*, a production of a tree called *Coddam-pulli*.

December 5th, 1809, died suddenly, at Paris, in the 120th year of his age, *Pierre Defournelle*, Doctor in Medicine. This extraordinary man was born at Barjac en Vivarais, the 25th of October, 1690. He enjoyed a pension, from having been a free-mason, one hundred years. He was a great traveller, fond of alchymy, and consumed his patrimony in the pursuit of the *hermetic science*.

At the Annual Meeting of the College of Physicians of London, October 1st, the following gentlemen were chosen officers for the ensuing year.

President.—Sir Lucas Pepys, Bart.

Censors.—Drs. Bree, Roberts, Ainsley, and Warren.

Treasurer.—Dr. Budd.

Register.—Dr. Harvey.

Commissioners for Regulating Mad-houses.—Sir Lucas Pepys, Bart. Drs. Stone, Pemberton, Lambe, and Price.

Secretary.—Dr. Powell.

At this Meeting, Drs. Morgan and Simmons were elected Fellows; and Drs. Dwyer and Black Licentiates.

Candidate.—Dr. Agar.

Theatre of Anatomy, Blenheim Street, Great Marlborough Street.—Mr. Brookes commenced his Autumnal Course of Lectures on Anatomy, Physiology, and Surgery, on Monday, the 1st of October, at two o'clock.

Spacious apartments, thoroughly ventilated, are open all the morning for the purposes of dissecting and injecting, where Mr. Brookes attends.

Mr. Macartney commenced his Course of Lectures on Comparative Anatomy, and the Laws of Organic Existence, in the Theatre at St. Bartholomew's Hospital, on Monday evening, October the 15th, at eight o'clock. The Lectures will be repeated on the Wednesday, Friday, and Monday evenings, at the same hours during the Course.

Middlesex Hospital.—Dr. Satterley's Course of Clinical Instruction will begin the first week in November: the attendance on the patients will be continued daily, and Lectures will be given once a week, or oftener, when it may be necessary, at eleven o'clock. Mr. Cartwright, Surgeon to the Hospital, will undertake such occasional Demonstrations of Morbid Anatomy, as may be required for the illustration of the respective cases. The objects of the Course will also be extended to such remarkable peculiarities in the diseases of Children, as may occur in the Foundling Hospital.

Dr. Young will begin, in February, a Course of Lectures on Physiology, and on the most important parts of the Practice of Physic; in particular the Nature and treatment of Febrile Diseases; he will deliver them on Tuesdays and Fridays, at seven o'clock in the evening.

Electrical and Electro-Chemical Science.—Mr. George Singer will commence a comprehensive Series of Lectures on these important branches of Science, early in the ensuing Season. A Prospectus of the plan of instruction may be had of Mr. Cutbertson, 54, Poland Street, or Mr. Singer, 3, Princes Street, Cavendish Square.

Mr. Armiger, late Anatomical Demonstrator at the London Hospital, will commence a course of Lectures on Practical Anatomy and Operative Surgery, on January 1st, 1811. Particulars may be known, by inquiring at 23, Pavement, Moorfields.

Lately have been brought to London the skin and some of the bones of that remarkable animal the *Camelopardus Giraffa.* The cranium of this animal, presumed to be the only one in Europe, is in possession of Mr. Brooks, the *Anatomist*; and a few days since was shewn at his Lecture. This cranium is much larger than that of the horse, remarkably delicate in some of its proportions, and has several peculiarities. Some years ago *Lady Strathmore* presented the skin of one of these animals to Mr. John Hunter; there was another at the Hague, which, with that now preparing for the Museum of Mr. Bullock in Piccadilly, are, if we mistake not, the only specimens of this extraordinary creature yet brought to Europe.

BOOKS IN THE PRESS.

A Natural History of the Human Teeth, with a Treatise on their Diseases, from Infancy to Age, adapted for General Information.

mation. To which are added, Observations on the Physiognomy of the Teeth and of the Projecting Chin. By Joseph Murphy, Surgeon Dentist, of Leeds.

A Third and Fourth Part of Mr. Abernethy's Surgical Observation on Injuries of the Head, Miscellaneous Subjects, Chronic Abscesses, and tumours.

A Second Volume of the Medico-Chirurgical Transactions.

Facts and Opinions concerning Diabetes, by Dr. Latham.

A System of Surgery, by Mr. James Russell, Surgeon, F. R. S. &c. and a System of Anatomy, by Dr. John Gordon, of Edinburgh.

The Second Fasciculus of Mr. Watt's Anatomio-Chirurgical Views, intended to illustrate the Anatomy of the Male and Female Pelvis, and their Contents; the Muscles of the Perineum, as they appear on Dissection; and the External Organs of Generation in both Sexes.

A Treatise on Mortification, by Mr. Lee, Surgeon, of Shields.

Mr. Ramsden's Cases of Cure of the Derangements of the Testicle, Demonstration of their being sympathetic with the Urethra, and to shew that most of the Diseases of that Gland are perfectly within Remedy. Also Cases of the Hydrocele, in which the radical Cure has been effected without recourse to any of the Operations at present employed for that Purpose.

A Biographical account of the late Dr. Beddoes, by J. C. Stock, M. D. and a Posthumous Work on the Eye, left by Mr. Saunders.

A Treatise on the Subject of Cancer, by Dr. Denman.

The Seventh Edition of the New London Practice of Physic, by E. G. Clarke, M. D. Author of the Medicinæ Praxeos, &c.

A Concise Description of the Human Bones, chiefly from the Works of the late Professor Monro; accompanied with accurate Engravings.

A new Edition of the Elements of Chemistry, by Murray. This Edition is intended particularly to exhibit the splendid Discoveries of Professor Davy.

A new Edition of Cullen's First Lines of the Practice of Physic, by Dr. Peter Reid, a gentleman of known ability and industry. It is intended to insert the nosology at the head of each chapter, and to improve the whole by the addition of recent discoveries in Medical Science.

Mr. W. Salisbury has published the following observations on the probable cause of the destruction of a large proportion of the plane trees in this country last year:—

"There are three different species of *Platanus* commonly cultivated in this country; two are natives of the Levant, and the other of the Northern States of America: those of course differ as much in their habits of growth, as the seasons in the climates which produce them. It is well known to all cultivators of exotic plants, that such as are natives of the colder climates are the earliest

earliest in vegetating, being most sensibly acted on and forced forward by the mildness of the weather commonly in February and March; and are often checked or killed by the return of frost and cold after that period; and this has been evidently the case with the Platanus Occidentalis, American Plane, the one which has suffered so much of late, the other kinds remaining without any injury having occurred to them. The time these trees received their death-blow was in the spring of 1809, when it will be recollected, that we had a dreadful flood all over this kingdom; and that, during March and April, we had very mild weather, during which time these trees were greatly forwarded in germination (as were many other kinds from the same cause, and which suffered considerably at the time); this was succeeded by a very severe frost, which appears to have ruptured the sap vessels, so that the greater part of these trees have since died in consequence. In such an extraordinary season as this was, it would almost appear presumptuous in any person's attempting to explain the real cause of so mortifying a phenomenon; it is therefore only a matter of opinion. That the extreme moisture had been in a great measure the cause, I was firmly persuaded; but there is, moreover, proof that the cold had been its principal agent: for small trees of this kind have escaped, where they have been in thick plantations, protected by other kinds; whilst those growing nearly in the same spot, and not having the same protection, have been completely killed; and this has been the case with several in my garden. I am now speaking of small trees, under 10 feet high, of which I have lost many hundreds; but these of larger growth are, I believe, generally destroyed all over the country."

The first class of the National Institute has nominated M. VON HUMBOLDT to the place of Foreign Associate, vacant by the death of Mr. Cavendish.

Accouns from Santa Fé, in New Grenada, dated August 19, 1809, mention the death of the celebrated MUTIS, the friend of Linnæus, and one of the greatest botanists of the age. This venerable and worthy man had devoted upwards of fifty years to the examination of the vegetable productions of America. Attached at first as physician to the viceroy, the count of Casa Flores, he began at his own expense to have drawings, made by native painters, formed by himself, for the *Flora of Bagota.* This grand work will be continued, and is greatly extended since he was appointed director of the botanical expedition of New Grenada. He had collected in his house considerable herbaries, more than 1500 coloured drawings of new plants, philosophical and astronomical instruments, and a collection of botanical works, inferior only to that of the illustrious President of the Royal Society of London.

Mr. Rea, one of Mutis's pupils, is the present director of the botanical garden of Madrid. His nephew, Don Sinforosa Mutis, has been commissioned by the government to complete the *Flora of Bagota*, for which no more than 566 descriptions of new species have been found drawn up by the deceased. Messrs. Mutis and Rixa, two distinguished artists, natives of Santa Fé, are finishing the numerous drawings that

were

were begun. M. Mutis, who in his old age had embraced the ecclesiastical profession, was equally distinguished for the variety and solidity of his attainments, and for the liberality and elevation of his sentiments. Previous to his death, he directed that his library, collections, and instruments, should be applied to the public use of his fellow-citizens.—Europe is indebted to him for the important discovery of the quinquina of New Grenada. The orange-coloured quinquina, of Santa Fe (*cinchona lancifolia*) which is not inferior in quality to the bark of Loxa, (*cinchona condaminea*) has become an important branch of commerce, at the ports of Carthagena, and Santa Martha.

In the ensuing spring, Dr. Thomas Jameson, of Cheltenham, will publish an Enquiry into the Physiological changes of the human body at its different ages, the diseases to which it is predisposed in each period of life, and the principles of longevity.

During last winter, a phenomenon, which would appear incredible, were it not attested by a great number of persons of known veracity, occurred in the vicinity of Placentia. On the 17th of January, red snow fell upon the mountains in this department, and especially upon that known by the name of Cento-croci. A coat of white snow had covered the tops of these mountains, when several peals of thunder, accompanied with lightning, were heard. From this moment, the snow that fell was red; this continued for some time, after which white snow again fell, so that the red was inclosed between two strata of white. In some places, this snow was only of the color of peach-blossom, but in others of deep red. Some of it was collected, and the water which it yielded, when melted, retained the same colour. The analysis of it by M. Guigotti, a chemist of Parma, promises interesting results. This phenomenon seems to furnish us with the means of explaining the showers of blood, which are mentioned by the ancients in their histories. We have already ascertained the existence of *pesinites*, or stones fallen from the atmosphere, which the Greeks and Latins have spoken of; and now it is impossible to deny the reality of showers of a blood-red color, which are described by the same authors.

From the New York Medical Repository.

Sickness in the Army at New-Orleans, in 1809.

GREAT mortality was suffered by the detachment of the American army encamped on the bank of the Mississippi, below New-Orleans. The troops were ordered to a place about fifteen miles to the south-east of the city. The ground selected by the quarter-master was low and swampy. A spot was cleared in the forest for their reception. Frequently, after a shower of rain, the camp was wet and muddy. In the rear were puddles of stagnant water. A luxuriant crop of vegetables grew in these, and putrified in the course of the season. When

When the heats came on during the summer, the exhalations were rank and offensive.

Quartered on such damp ground, and breathing such a noxious atmosphere, the men soon became sickly. And this predisposition to disease was the more serious, inasmuch as the officers and soldiers came chiefly from more elevated and northerly climes, and had never been seasoned to southern service.

The situation of the army was the more calamitous, by reason of an omission to organize the medical staff, and to establish a regular hospital department. They who fell sick were not furnished with the usual accommodations. There were not even medicines in the camp to be dispensed to those who stood in need of them. Generally destitute of nurses, remedies, and attendance, the diseased recovered by strength of constitution or sunk under their complicated miseries.

But their condition was further aggravated. The beef and pork of their rations were remarked to be often in a corrupting and stinking state. Whether the salt had been too sparingly applied to them, or was of a weak and faulty quality, is not finally settled; but so it was, the meat was disgusting and unwholesome.

Fresh provisions were seldom afforded to the men; and the few that were issued were poor and scanty. There seemed to be no regular organization of the commissary's department.

As might have been predicted, the men became diseased, and died so rapidly, that orders were given to quit the station, and move the survivors to the higher country, near to Natchez. The prevailing forms of diseases in the camp were diarrhæas, dysenteries, remitting and intermitting fevers. In process of time, also, the scurvy mingled with the other maladies. This scorbutic diathesis manifested itself by swelled gums and loosened teeth. The soldiers, as surgeon Cutter declared to Dr. Mitchill, could frequently extract sound teeth from their gums with their fingers. Ulcers broke out in the mouth, tonsils and throat, of a most malignant character; and ate away all before them. The cheeks have been sometimes perforated quite through by this destructive ulceration; and even the large blood-vessels of the neck corroded so as to discharge their contents, and terminate life by sudden hæmorrhage.

In the House of Representatives an inquiry was instituted to investigate this miserable business; and Mr. Newton, from the committee appointed to inquire into the causes of the mortality which prevailed in the detachment of the army ordered for the defence of New-Orleans, made a long report, accompanied with various depositions and other papers. It concludes as follows:

"The committee, from a knowledge which they have acquired of the climate of New-Orleans and of the country surrounding it, and from the facts stated in the depositions, are of opinion that the mortality in the detachment ordered to New-Orleans is to be ascribed to the following causes:

"1. The detachment consisting of new levies.

"2. The insalubrity of the climate, the summer and autumn of 1809 being unusually sickly.

"3. In

Published Dec.r 1, 1810, by R. Phillips, Bridge Street, London.

Cooper sculp.

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